

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

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

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

ADDRESS (number and street)

1625 L STREET NW

Check if different
than previously
reported. (ACC)

WASHINGTON

DC

20036

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00011114

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☒ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y

in the
State of

DC

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y

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

MCBRIDE, ELISSA, , ,

Type or Print Name of Treasurer

Signature of Treasurer

MCBRIDE, ELISSA, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

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

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
10 / 18 / 2018 To: M M / D D / Y Y Y Y Y Y
11 / 26 / 2018

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2018		6404931.82
(b) Cash on Hand at Beginning of Reporting Period.....	2544319.05	
(c) Total Receipts (from Line 19)	833987.77	12422386.21
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	3378306.82	18827318.03
7. Total Disbursements (from Line 31).....	1709117.74	17158128.95
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	1669189.08	1669189.08
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)	3500000.00	



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. 05/2016)

Page 3

Write or Type Committee Name

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

Report Covering the Period:

From:

M M / D D / Y Y Y Y
10 18 2018

To:

M M / D D / Y Y Y Y
11 26 2018

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).....

111807.60

777800.74

(ii) Unitemized

708772.23

7444854.14

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

820579.83

8222654.88

(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)

820579.83

8222654.88

12. Transfers From Affiliated/Other

Party Committees.....

12812.56

664246.63

13. All Loans Received

0.00

3500000.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

17000.00

17. Other Federal Receipts

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

595.38

18484.70

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))

833987.77

12422386.21

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

833987.77

12422386.21

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	18972.21	86020.67
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	18972.21	86020.67
22. Transfers to Affiliated/Other Party Committees.....	885734.26	5514229.27
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	104500.00	1789500.00
24. Independent Expenditures (use Schedule E)	92099.55	4715370.17
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	933333.37
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	- 26.96	2205.79
(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)).....	- 26.96	2205.79
29. Other Disbursements (Including Non-Federal Donations).....	607838.68	4117469.68
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1709117.74	17158128.95
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1709117.74	17158128.95

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	820579.83	8222654.88
34. Total Contribution Refunds (from Line 28(d))	- 26.96	2205.79
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	820606.79	8220449.09
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	18972.21	86020.67
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	18972.21	86020.67

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

FOR LINE NUMBER: PAGE 6 OF 1411

(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. ABALOS, GEORGE, , ,

Mailing Address 1426 North School Street

City
HonoluluState
HIZip Code
96817FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 646Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.211277

Amount of Each Receipt this Period

22.00

☐ Memo Item

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

B. ABATE, MICHAEL, A., ,

Mailing Address 14019 23rd Avenue NE

City
SeattleState
WAZip Code
98125FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28Occupation (for Individual)
COUNCIL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	14	2018

Transaction ID : SA11AI.207755

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. ABBE, JEFFREY, S., ,

Mailing Address P.O. Box 486

City
HaroldState
KYZip Code
41635FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
ORGANIZER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1666.52

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206167

Amount of Each Receipt this Period

83.90

☐ Memo Item

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

125.90

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

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

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

FOR LINE NUMBER: PAGE 7 OF 1411

(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. **ABBE, JEFFREY, S., ,**

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 (for Individual)
AFSCME INT'L

Occupation (for Individual)
ORGANIZER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206520

Amount of Each Receipt this Period

83.90

☐ Memo Item

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

B. **ABBIATICI, KAREN, , ,**

Mailing Address 4602 W. Barlind

City
Pittsburgh

State
PA

Zip Code
15227

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13

Occupation (for Individual)
SECRETARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

592.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.206974

Amount of Each Receipt this Period

52.68

☐ Memo Item

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

C. **ABE, ARNOLD, D., ,**

Mailing Address P.O. Box 1208

City
Haiku

State
HI

Zip Code
96708

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 152

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.210978

Amount of Each Receipt this Period

21.00

☐ Memo Item

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

157.58

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 8 OF 1411

(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. ABEL, JULIE, D., ,

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 (for Individual)

AFSCME IA CN 61

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2018

Transaction ID : SA11AI.211864

Amount of Each Receipt this Period

50.00

☐

Memo Item

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

B. ABEL, JULIE, D., ,

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 (for Individual)

AFSCME IA CN 61

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2018

Transaction ID : SA11AI.211883

Amount of Each Receipt this Period

50.00

☐

Memo Item

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

C. ABELSON, RICHARD, W., ,

Mailing Address 901 N. Nelson Street
Apt. 901

City

Arlington

State

VA

Zip Code

22203

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

CHAIRPERSON, JUDICIAL PANEL

Receipt For:

☐
☐

Primary

General

Other (specify)

Aggregate Year-to-Date ▼

1957.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2018

Transaction ID : SA11AI.206168

Amount of Each Receipt this Period

93.35

☐

Memo Item

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

193.35

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

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

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

FOR LINE NUMBER: PAGE 9 OF 1411

(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. ABELSON, RICHARD, W., ,

Mailing Address 901 N. Nelson Street
Apt. 901

City
Arlington

State
VA

Zip Code
22203

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

CHAIRPERSON, JUDICIAL PANEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2050.35

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206521

Amount of Each Receipt this Period

93.35

☐ Memo Item

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

B. ABMAN, TRACEY, , ,

Mailing Address 3136 N. Seminary Avenue

City
Chicago

State
IL

Zip Code
60657-3309

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31

Occupation (for Individual)

DIRECTOR OF ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1152.40

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208105

Amount of Each Receipt this Period

106.74

☐ Memo Item

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

C. ABRAMS, LARRY, J., ,

Mailing Address 714 Impala Drive

City
Mansfield

State
OH

Zip Code
44903

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

MAINTENANCE REPAIR TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.209960

Amount of Each Receipt this Period

8.50

☐ Memo Item

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

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

208.59

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

FOR LINE NUMBER: PAGE 10 OF 1411

(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. ACKERSON, LYNN, M., ,

Mailing Address P.O. Box 1196

City

Bowling Green

State

OH

Zip Code

43402

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

ENVIRONMENTAL SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.208699

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. ACKERSON, LYNN, M., ,

Mailing Address P.O. Box 1196

City

Bowling Green

State

OH

Zip Code

43402

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

ENVIRONMENTAL SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209330

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. ACKERSON, LYNN, M., ,

Mailing Address P.O. Box 1196

City

Bowling Green

State

OH

Zip Code

43402

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

ENVIRONMENTAL SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.209961

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

30.00

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 11 OF 1411

(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. ACOCELLA, BARTHOLOMEW, M., ,

Mailing Address 6428 Barnaby Street NW

City
Washington

State
DC

Zip Code
20015

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

EXECUTIVE COMMUNICATIONS STR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1186.40

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206169

Amount of Each Receipt this Period

57.82

☐ Memo Item

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

B. ACOCELLA, BARTHOLOMEW, M., ,

Mailing Address 6428 Barnaby Street NW

City
Washington

State
DC

Zip Code
20015

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

EXECUTIVE COMMUNICATIONS STF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1244.22

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206522

Amount of Each Receipt this Period

57.82

☐ Memo Item

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

C. ACORD, CANDACE, M., ,

Mailing Address 9 Appollo Place

City
Iowa City

State
IA

Zip Code
52240

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IA CN 61/DOCS

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1102.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 18 / 2018

Transaction ID : SA11AI.211828

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

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

155.64

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

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

FOR LINE NUMBER: PAGE 12 OF 1411

(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. ACORD, CANDACE, M., ,

Mailing Address 9 Appollo Place

City
Iowa City

State
IA

Zip Code
52240

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/DOCS

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1142.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.211884

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

B. ACTON, CATHYRN, , ,

Mailing Address 190 W. Ostend Street
Suite 101

City
Baltimore

State
MD

Zip Code
21230

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MD CN 3

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.32

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211312

Amount of Each Receipt this Period

63.08

☐ Memo Item

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

C. ACTON, CORY, A., ,

Mailing Address 4783 State Route 545

City
Ashland

State
OH

Zip Code
44805

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 ▼

319.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208700

Amount of Each Receipt this Period

14.50

☐ Memo Item

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

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

117.58

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

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

FOR LINE NUMBER: PAGE 13 OF 1411

(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. ACTON, CORY, A., ,

Mailing Address 4783 State Route 545

City
Ashland

State
OH

Zip Code
44805

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 ▼

333.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209331

Amount of Each Receipt this Period

14.50

☐ Memo Item

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

B. ACTON, CORY, A., ,

Mailing Address 4783 State Route 545

City
Ashland

State
OH

Zip Code
44805

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 ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.209962

Amount of Each Receipt this Period

14.50

☐ Memo Item

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

C. ADAMS, CHARLES, C., ,

Mailing Address P.O. Box 1661

City
Mansfield

State
OH

Zip Code
44901

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208701

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

39.00

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

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

FOR LINE NUMBER: PAGE 14 OF 1411

(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. ADAMS, CHARLES, C., ,

Mailing Address P.O. Box 1661

City
MansfieldState
OHZip Code
44901FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209332

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. ADAMS, CHARLES, C., ,

Mailing Address P.O. Box 1661

City
MansfieldState
OHZip Code
44901FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.209963

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. ADAMS, JEFFREY, D., ,

Mailing Address 75 5th Street

City
SpringfieldState
OHZip Code
45504FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CUST.SERV. DIS.VETS.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.208702

Amount of Each Receipt this Period

9.50

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

29.50

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 OF 1411

(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. ADAMS, JEFFREY, D., ,

Mailing Address 75 5th Street

City
Springfield

State
OH

Zip Code
45504

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
CUST.SERV. DIS.VETS.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209333

Amount of Each Receipt this Period

9.50

☐ Memo Item

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

B. ADAMS, JEFFREY, D., ,

Mailing Address 75 5th Street

City
Springfield

State
OH

Zip Code
45504

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
CUST.SERV. DIS.VETS.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.209964

Amount of Each Receipt this Period

9.50

☐ Memo Item

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

C. ADAMS, KEITH, L., ,

Mailing Address 425 S Chestnut

City
Collinsville

State
IL

Zip Code
62234

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
SEC THERAPY AIDE TR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

357.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208106

Amount of Each Receipt this Period

42.00

☐ Memo Item

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

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

61.00

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

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

FOR LINE NUMBER: PAGE 16 OF 1411

(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. ADAMS, RENEE, K., ,

Mailing Address 14321 Kingsford Avenue

City
Cleveland

State
OH

Zip Code
44128

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208703

Amount of Each Receipt this Period

10.50

☐ Memo Item

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

B. ADAMS, RENEE, K., ,

Mailing Address 14321 Kingsford Avenue

City
Cleveland

State
OH

Zip Code
44128

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209334

Amount of Each Receipt this Period

10.50

☐ Memo Item

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

C. ADAMS, RENEE, K., ,

Mailing Address 14321 Kingsford Avenue

City
Cleveland

State
OH

Zip Code
44128

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.209965

Amount of Each Receipt this Period

10.50

☐ Memo Item

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

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

31.50

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

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

FOR LINE NUMBER: PAGE 17 OF 1411

(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. ADAMS, YAQUANTIS, , ,

Mailing Address 978 Cobb Blvd.

City
Kankakee

State
IL

Zip Code
60901

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

HUMAN SERVICES CASEWORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.82

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208107

Amount of Each Receipt this Period

31.26

☐ Memo Item

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

B. ADAMS-NORMAN, TAMMY, , ,

Mailing Address 3008 Parkington Place SE

City

Port Orchard

State

WA

Zip Code

98366

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 09 / 2018

Transaction ID : SA11AI.207552

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. ADAMS-NORMAN, TAMMY, , ,

Mailing Address 3008 Parkington Place SE

City

Port Orchard

State

WA

Zip Code

98366

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 26 / 2018

Transaction ID : SA11AI.207756

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

51.26

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

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

FOR LINE NUMBER: PAGE 18 OF 1411

(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. ADKISSON, MARGARET, E., ,

Mailing Address 275 Orange Avenue
#133

City
Chula Vista

State
CA

Zip Code
91911

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 3930

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211137

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. AGBAYANI, CARRICK, , ,

Mailing Address P.O. Box 1348

City
Aiea

State
HI

Zip Code
96701

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 152

Occupation (for Individual)
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
11 / 01 / 2018

Transaction ID : SA11AI.210979

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. AIDARA, MARIAN, E., ,

Mailing Address 22155 Libby Road
#103

City
Bedford Hts

State
OH

Zip Code
44146

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
THERAPUTIC PROGRAM WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.209966

Amount of Each Receipt this Period

8.50

☐ Memo Item

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

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

53.50

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

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

FOR LINE NUMBER: PAGE 19 OF 1411

(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. AIKPAOJIE, CHARLES, I ., ,

Mailing Address P.O. Box 140851

City
Toledo

State
OH

Zip Code
43614

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
THERAPUTIC PROGRAM REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209336

Amount of Each Receipt this Period

9.00

☐ Memo Item

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

B. AIKPAOJIE, CHARLES, I ., ,

Mailing Address P.O. Box 140851

City
Toledo

State
OH

Zip Code
43614

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
THERAPUTIC PROGRAM REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.209967

Amount of Each Receipt this Period

9.00

☐ Memo Item

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

C. AKI, AUDREY, , ,

Mailing Address 66-370 Paalaa Road

City
Haleiwa

State
HI

Zip Code
96712

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI RET CHPT 152

Occupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

440.00

Date of Receipt

11 / 01 / 2018

Transaction ID : SA11AI.211035

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

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

58.00

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

FOR LINE NUMBER: PAGE 20 OF 1411

(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. AKINSOJI, ADEWALE, , ,

Mailing Address 8209 Thomas Avenue N

City
MinneapolisState
MNZip Code
55444FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MNOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	01	2018

Transaction ID : SA11AI.211624

Amount of Each Receipt this Period

16.00

☐ Memo Item

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

B. AKO, GERALD, T, ,Mailing Address 888 Mililani Street
Suite 601City
HonoluluState
HIZip Code
96813-2991FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 152Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	01	2018

Transaction ID : SA11AI.210980

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. ALAGBALA, MUSILIU ADE, , ,Mailing Address 5701 N. Sheridan
#10ACity
ChicagoState
ILZip Code
60660FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

809.20

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208108

Amount of Each Receipt this Period

80.92

☐ Memo Item

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

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

126.92

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

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

FOR LINE NUMBER: PAGE 21 OF 1411

(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. ALBAO, TIMOTHY, L., ,

Mailing Address 1374 Mailani Street

City
Hilo

State
HI

Zip Code
96720

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI RET CHPT 152

Occupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211036

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. ALBERG, THORNTON, P., ,

Mailing Address 615 136th Street E

City
Tacoma

State
WA

Zip Code
98445

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

620.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 25 / 2018

Transaction ID : SA11AI.207352

Amount of Each Receipt this Period

31.00

☐ Memo Item

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

C. ALBERG, THORNTON, P., ,

Mailing Address 615 136th Street E

City
Tacoma

State
WA

Zip Code
98445

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

651.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207553

Amount of Each Receipt this Period

31.00

☐ Memo Item

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

87.00

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 22 OF 1411

(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. ALBERG, THORNTON, P., ,

Mailing Address 615 136th Street E

City
Tacoma

State
WA

Zip Code
98445

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

682.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207758

Amount of Each Receipt this Period

31.00

☐ Memo Item

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

B. ALDRETE, JOSE, D, , Jr.

Mailing Address 29 Viewpoint Circle

City
Pomona

State
CA

Zip Code
91766

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 1902

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 19 / 2018

Transaction ID : SA11AI.211054

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. ALDRETE, JOSE, D, , Jr.

Mailing Address 29 Viewpoint Circle

City
Pomona

State
CA

Zip Code
91766

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 1902

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211075

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

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

71.00

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

FOR LINE NUMBER: PAGE 23 OF 1411

(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. ALDRETE, JOSE, D, , Jr.

Mailing Address 29 Viewpoint Circle

City
PomonaState
CAZip Code
91766FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 1902Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	20	2018

Transaction ID : SA11AI.211096

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

B. ALEXANDER, ADRIENNE, , ,Mailing Address 1423 W 19th Street
Apt. 4RCity
ChicagoState
ILZip Code
60608FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.83

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208109

Amount of Each Receipt this Period

82.58

☐ Memo Item

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

C. ALEXANDER, DEBRA, J., ,

Mailing Address 40103 N. 114 Pr. NW

City
Benton CityState
WAZip Code
99320FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	25	2018

Transaction ID : SA11AI.207353

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

117.58

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 OF 1411

(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. ALEXANDER, DEBRA, J., ,

Mailing Address 40103 N. 114 Pr. NW

 City
 Benton City

 State
 WA

 Zip Code
 99320

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.207554

Amount of Each Receipt this Period

☐ Memo Item

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

B. ALEXANDER, DEBRA, J., ,

Mailing Address 40103 N. 114 Pr. NW

 City
 Benton City

 State
 WA

 Zip Code
 99320

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.207759

Amount of Each Receipt this Period

☐ Memo Item

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

C. ALLAN, ANDREW, , ,

Mailing Address 5138 Tomahawk Trail

 City
 Madison

 State
 WI

 Zip Code
 53705

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME WI CN 32/DANE COUNTY

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.211410

Amount of Each Receipt this Period

☐ Memo Item

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

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

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

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

FOR LINE NUMBER: PAGE 25 OF 1411

(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. ALLAN, ANDREW, , ,

Mailing Address 5138 Tomahawk Trail

City
Madison

State
WI

Zip Code
53705

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WI CN 32/DANE COUNTY

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

11 / 01 / 2018

Transaction ID : SA11AI.211411

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. ALLAN, ANDREW, , ,

Mailing Address 5138 Tomahawk Trail

City
Madison

State
WI

Zip Code
53705

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WI CN 32/DANE COUNTY

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 16 / 2018

Transaction ID : SA11AI.211428

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. ALLDREDGE, TERESA, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.207555

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

30.00

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

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

A. ALLDREDGE, TERESA, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 26 / 2018

Transaction ID : SA11AI.207760

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. ALLEN, ARDITH, , ,

Mailing Address 183 Prairie Creek Way

City
Columbus

State
OH

Zip Code
43213

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
SOCIAL SCIENCE RESEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208706

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. ALLEN, ARDITH, , ,

Mailing Address 183 Prairie Creek Way

City
Columbus

State
OH

Zip Code
43213

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
SOCIAL SCIENCE RESEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209337

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

30.00

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

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

A. ALLEN, ARDITH, , ,

Mailing Address 183 Prairie Creek Way

City
Columbus

State
OH

Zip Code
43213

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
SOCIAL SCIENCE RESEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.209968

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. ALLEN, ELIZABETH, A., ,

Mailing Address 427 11th Avenue NW

City
Saint Paul

State
MN

Zip Code
55112

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211625

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. ALLEN, KEVIN, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 25 / 2018

Transaction ID : SA11AI.207355

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

65.00

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

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

FOR LINE NUMBER: PAGE 28 OF 1411

(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. ALLEN, KEVIN, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207556

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. ALLEN, KEVIN, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207761

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. ALLEN, TAMIKA, R., ,

Mailing Address 228 Cline Avenue

City
Mansfield

State
OH

Zip Code
44907

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 ▼

204.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.209969

Amount of Each Receipt this Period

8.50

☐ Memo Item

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

58.50

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 29 OF 1411

(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. ALLISON, BRIAN, A., ,

Mailing Address 3525 Redgold Way

City
Sacramento

State
CA

Zip Code
95826

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ASSISTANT DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1193.90

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206171

Amount of Each Receipt this Period

58.22

☐ Memo Item

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

B. ALLISON, BRIAN, A., ,

Mailing Address 3525 Redgold Way

City
Sacramento

State
CA

Zip Code
95826

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ASSISTANT DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1252.12

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206524

Amount of Each Receipt this Period

58.22

☐ Memo Item

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

C. ALLY, SABEELA, N., ,

Mailing Address 2332 Cobble Hill Terrace

City
Silver Spring

State
MD

Zip Code
20902

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
STRATEGIC ANALYST II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

812.26

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206172

Amount of Each Receipt this Period

44.12

☐ Memo Item

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

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

160.56

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

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

A. ALLY, SABEELA, N., ,

Mailing Address 2332 Cobble Hill Terrace

City
Silver Spring

State
MD

Zip Code
20902

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
STRATEGIC ANALYST II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

856.38

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206525

Amount of Each Receipt this Period

44.12

☐ Memo Item

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

B. ALTENDORFER, LISA, K., ,

Mailing Address 249 Warburton Street W

City
So Saint Paul

State
MN

Zip Code
55075

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

627.30

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211626

Amount of Each Receipt this Period

41.95

☐ Memo Item

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

C. ALTMAN, CATHY, L., ,

Mailing Address 30 Firwood Drive

City
Dayton

State
OH

Zip Code
45419

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
ENVIRONMENTAL SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.209970

Amount of Each Receipt this Period

8.50

☐ Memo Item

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

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

94.57

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 OF 1411

(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. ALVARADO, THERESA, J., ,

Mailing Address 209 Prescott Street

 City
 Saint Paul

 State
 MN

 Zip Code
 55107

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME MN CN 5/STATE OF MN

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.211627

Amount of Each Receipt this Period

☐ Memo Item

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

B. ALVAREZ, BERNICE, B., ,

Mailing Address 2023 Evergreen Street

 City
 Burbank

 State
 CA

 Zip Code
 91505

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME INT'L

 Occupation (for Individual)
 FIELD EDUCATION COORDINATOR I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.206173

Amount of Each Receipt this Period

☐ Memo Item

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

C. ALVAREZ, BERNICE, B., ,

Mailing Address 2023 Evergreen Street

 City
 Burbank

 State
 CA

 Zip Code
 91505

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME INT'L

 Occupation (for Individual)
 FIELD EDUCATION COORDINATOR II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.206526

Amount of Each Receipt this Period

☐ Memo Item

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 32 OF 1411
(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. ALVIN, ERIC, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 110 Richland Lane <table border="1"> <tr> <td>City Madison</td> <td>State WI</td> <td>Zip Code 53705</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1"> <tr> <td>Name of Employer (for Individual) AFSCME WI CN 32/DANE COUNTY</td> <td>Occupation (for Individual) STAFF REPRESENTATIVE</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>220.00</td> </tr> </table>			City Madison	State WI	Zip Code 53705	Name of Employer (for Individual) AFSCME WI CN 32/DANE COUNTY	Occupation (for Individual) STAFF REPRESENTATIVE	220.00	Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td>24</td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.211412 Amount of Each Receipt this Period <table border="1"> <tr> <td>10.00</td> </tr> </table> ☐ Memo Item	M M M	D D D	Y Y Y Y Y Y	10	24	2018	10.00
City Madison	State WI	Zip Code 53705														
Name of Employer (for Individual) AFSCME WI CN 32/DANE COUNTY	Occupation (for Individual) STAFF REPRESENTATIVE															
220.00																
M M M	D D D	Y Y Y Y Y Y														
10	24	2018														
10.00																
B. ALVIN, ERIC, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 110 Richland Lane <table border="1"> <tr> <td>City Madison</td> <td>State WI</td> <td>Zip Code 53705</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1"> <tr> <td>Name of Employer (for Individual) AFSCME WI CN 32/DANE COUNTY</td> <td>Occupation (for Individual) STAFF REPRESENTATIVE</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>230.00</td> </tr> </table>			City Madison	State WI	Zip Code 53705	Name of Employer (for Individual) AFSCME WI CN 32/DANE COUNTY	Occupation (for Individual) STAFF REPRESENTATIVE	230.00	Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td>01</td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.211413 Amount of Each Receipt this Period <table border="1"> <tr> <td>10.00</td> </tr> </table> ☐ Memo Item	M M M	D D D	Y Y Y Y Y Y	11	01	2018	10.00
City Madison	State WI	Zip Code 53705														
Name of Employer (for Individual) AFSCME WI CN 32/DANE COUNTY	Occupation (for Individual) STAFF REPRESENTATIVE															
230.00																
M M M	D D D	Y Y Y Y Y Y														
11	01	2018														
10.00																
C. ALVIN, ERIC, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 110 Richland Lane <table border="1"> <tr> <td>City Madison</td> <td>State WI</td> <td>Zip Code 53705</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1"> <tr> <td>Name of Employer (for Individual) AFSCME WI CN 32/DANE COUNTY</td> <td>Occupation (for Individual) STAFF REPRESENTATIVE</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>240.00</td> </tr> </table>			City Madison	State WI	Zip Code 53705	Name of Employer (for Individual) AFSCME WI CN 32/DANE COUNTY	Occupation (for Individual) STAFF REPRESENTATIVE	240.00	Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td>16</td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.211429 Amount of Each Receipt this Period <table border="1"> <tr> <td>10.00</td> </tr> </table> ☐ Memo Item	M M M	D D D	Y Y Y Y Y Y	11	16	2018	10.00
City Madison	State WI	Zip Code 53705														
Name of Employer (for Individual) AFSCME WI CN 32/DANE COUNTY	Occupation (for Individual) STAFF REPRESENTATIVE															
240.00																
M M M	D D D	Y Y Y Y Y Y														
11	16	2018														
10.00																
SUBTOTAL of Receipts This Page (optional)..... ▶			<table border="1"> <tr> <td>30.00</td> </tr> </table>	30.00												
30.00																
TOTAL This Period (last page this line number only)..... ▶			<table border="1"> <tr> <td></td> </tr> </table>													

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

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

FOR LINE NUMBER: PAGE 33 OF 1411

(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. AMERSON, NANCY, L., ,

Mailing Address 1708 S Buhr Mill Court

City
Springfield

State
IL

Zip Code
62704

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
PUBLIC SERVICE ADMIN.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208110

Amount of Each Receipt this Period

41.68

☐ Memo Item

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

B. AMIMOTO, SHERI-LYN, R., ,

Mailing Address 2881 Puanani Street

City
Lihue

State
HI

Zip Code
96766

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 152

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.210981

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. AMUNDSON-WOJTON, BRENDA, , ,

Mailing Address 165 West Ridge Pike

City
Limerick

State
PA

Zip Code
19468

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206975

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

81.68

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

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

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

FOR LINE NUMBER: PAGE 34 OF 1411

(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. **ANDERSON, ANITA, , ,**

Mailing Address 2312 W Roosevelt Road
Apt. 1

City
Broadview

State
IL

Zip Code
60155

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
ADMINISTRATIVE ASSISTANT I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 18 / 2018

Transaction ID : SA11AI.210762

Amount of Each Receipt this Period

60.00

☐ Memo Item

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

B. **ANDERSON, ANITA, , ,**

Mailing Address 2312 W Roosevelt Road
Apt. 1

City
Broadview

State
IL

Zip Code
60155

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
ADMINISTRATIVE ASSISTANT I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208111

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. **ANDERSON, CANDACE, L., ,**

Mailing Address 34717 Dinner Lake Loop

City
Park Rapids

State
MN

Zip Code
56470

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
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
11 / 01 / 2018

Transaction ID : SA11AI.211628

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

100.00

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

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

FOR LINE NUMBER: PAGE 35 OF 1411

(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. ANDERSON, DAVID, A., ,

Mailing Address 1070 Middlefield Trail

City
BrunswickState
OHZip Code
44212FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.209971

Amount of Each Receipt this Period

8.50

☐ Memo Item

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

B. ANDERSON, EARLENE, , ,

Mailing Address 2396 Highway 22 W

City
MuscatineState
IAZip Code
52761FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61Occupation (for Individual)
CLERK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	18	2018

Transaction ID : SA11AI.211865

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. ANDERSON, EARLENE, , ,

Mailing Address 2396 Highway 22 W

City
MuscatineState
IAZip Code
52761FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61Occupation (for Individual)
CLERK

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	06	2018

Transaction ID : SA11AI.211885

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

108.50

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

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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

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

A. ANDERSON, HAROLD, R., ,

Mailing Address 3877 Conway Drive

City
Columbus

State
OH

Zip Code
43227

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
CUSTOMER SERVICE REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.209972

Amount of Each Receipt this Period

8.50

☐ Memo Item

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

B. ANDERSON, JEWYANA, F., ,

Mailing Address 2860 Scottwood Avenue

City
Toledo

State
OH

Zip Code
43610

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209342

Amount of Each Receipt this Period

9.00

☐ Memo Item

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

C. ANDERSON, JEWYANA, F., ,

Mailing Address 2860 Scottwood Avenue

City
Toledo

State
OH

Zip Code
43610

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.209973

Amount of Each Receipt this Period

9.00

☐ Memo Item

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

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

26.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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

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

A. ANDERSON, KENNETH, , ,

Mailing Address 11348 S Ridgeway

City
ChicagoState
ILZip Code
60655FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

762.79

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208112

Amount of Each Receipt this Period

76.28

☐ Memo Item

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

B. ANDERSON, SHANE, C., ,

Mailing Address 1123 W North Shore Avenue

City
ChicagoState
ILZip Code
60626FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

478.51

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208113

Amount of Each Receipt this Period

49.60

☐ Memo Item

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

C. ANDERSON, TIMOTHY, T., ,

Mailing Address 2725 Eldred Court

City
ApopkaState
FLZip Code
32712FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
INT'L UNION REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1663.60

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206174

Amount of Each Receipt this Period

79.63

☐ Memo Item

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

205.51

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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

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

A. ANDERSON, TIMOTHY, T., ,

Mailing Address 2725 Eldred Court

City
ApopkaState
FLZip Code
32712FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
INT'L UNION REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1743.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2018

Transaction ID : SA11AI.206527

Amount of Each Receipt this Period

79.82

☐ Memo Item

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

B. ANDREWS, BUFFY, , ,

Mailing Address 390 Worthington Road

City

Westerville

State

OH

Zip Code

43082

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2018

Transaction ID : SA11AI.209974

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

C. ANDREWS, LATRICIA, I., ,

Mailing Address 2519 30th Street

City

Rock island

State

IL

Zip Code

61201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
HUMAN SERVICES CASEWORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

Transaction ID : SA11AI.208114

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

159.82

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

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

FOR LINE NUMBER: PAGE 39 OF 1411

(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. ANGEL, KEITH, J., ,

Mailing Address 2711 Hafton Road

City
ColumbusState
OHZip Code
43204FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

594.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	6		2	0	1	8

Transaction ID : SA11AI.208712

Amount of Each Receipt this Period

27.00

☐ Memo Item

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

B. ANGEL, KEITH, J., ,

Mailing Address 2711 Hafton Road

City
ColumbusState
OHZip Code
43204FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

621.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	9		2	0	1	8

Transaction ID : SA11AI.209343

Amount of Each Receipt this Period

27.00

☐ Memo Item

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

C. ANGEL, KEITH, J., ,

Mailing Address 2711 Hafton Road

City
ColumbusState
OHZip Code
43204FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

648.00

Date of Receipt

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

Transaction ID : SA11AI.209975

Amount of Each Receipt this Period

27.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

81.00

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

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

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

230.00

Memo Item

 Memo Item

315.00

Memo Item

[illegible]

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 OF 1411

(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. APATA, PAUL, T., ,

 Mailing Address 8508 16th Street NW
 Apt. 611

 City
 Silver Spring

 State
 MD

 Zip Code
 20910

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME INT'L

 Occupation (for Individual)
 FIELD AUDITOR I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.206176

Amount of Each Receipt this Period

☐ Memo Item

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

B. APATA, PAUL, T., ,

 Mailing Address 8508 16th Street NW
 Apt. 611

 City
 Silver Spring

 State
 MD

 Zip Code
 20910

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME INT'L

 Occupation (for Individual)
 FIELD AUDITOR I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.206529

Amount of Each Receipt this Period

☐ Memo Item

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

C. APPELDORN, JOHN, P., ,

Mailing Address 16889 Mahoning Avenue

 City
 Lake Milton

 State
 OH

 Zip Code
 44429

 FEC ID number of contributing
 federal political committee.

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

 Occupation (for Individual)
 MAINTENANCE REPAIR TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.208713

Amount of Each Receipt this Period

☐ Memo Item

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

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

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

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

FOR LINE NUMBER: PAGE 42 OF 1411

(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. APPELDORN, JOHN, P., ,

Mailing Address 16889 Mahoning Avenue

City

Lake Milton

State

OH

Zip Code

44429

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

MAINTENANCE REPAIR TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209344

Amount of Each Receipt this Period

18.00

☐ Memo Item

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

B. APPELDORN, JOHN, P., ,

Mailing Address 16889 Mahoning Avenue

City

Lake Milton

State

OH

Zip Code

44429

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

MAINTENANCE REPAIR TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.209976

Amount of Each Receipt this Period

18.00

☐ Memo Item

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

C. APSEY, JEFFREY, , ,

Mailing Address 1034 N. Washington Avenue

City

Lansing

State

MI

Zip Code

48906

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MI CN 25

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

558.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211330

Amount of Each Receipt this Period

27.41

☐ Memo Item

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

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

63.41

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

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

FOR LINE NUMBER: PAGE 43 OF 1411

(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. APSEY, JEFFREY, , ,

Mailing Address 1034 N. Washington Avenue

City
Lansing

State
MI

Zip Code
48906

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MI CN 25

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

586.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 20 / 2018

Transaction ID : SA11AI.211375

Amount of Each Receipt this Period

27.41

☐ Memo Item

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

B. ARNOLD, GARY, W., , Sr.

Mailing Address 19122 Carter Road

City
Glouster

State
OH

Zip Code
45732

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210860

Amount of Each Receipt this Period

20.84

☐ Memo Item

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

C. ARNOLD, JENNIFER, , ,

Mailing Address 5868 Broad Blvd.

City
North Ridgevill

State
OH

Zip Code
44039

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 ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208714

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

58.25

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
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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. **ARNOLD, JENNIFER, , ,**

Mailing Address 5868 Broad Blvd.

City

North Ridgevill

State

OH

Zip Code

44039

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 ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209345

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. **ARNOLD, JENNIFER, , ,**

Mailing Address 5868 Broad Blvd.

City

North Ridgevill

State

OH

Zip Code

44039

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 ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.209977

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. **ARRINGTON, STARLET, S., ,**

Mailing Address 26 12th Street NW

City

Massillion

State

OH

Zip Code

44647

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

JUVENILE CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208715

Amount of Each Receipt this Period

12.50

☐ Memo Item

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

32.50

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
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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

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

A. ARRINGTON, STARLET, S., ,

Mailing Address 26 12th Street NW

City
Massillion

State
OH

Zip Code
44647

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
JUVENILE CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.50

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209346

Amount of Each Receipt this Period

12.50

☐ Memo Item

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

B. ARRINGTON, STARLET, S., ,

Mailing Address 26 12th Street NW

City
Massillion

State
OH

Zip Code
44647

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
JUVENILE CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.209978

Amount of Each Receipt this Period

12.50

☐ Memo Item

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

C. ARTZ, MICHAEL, L., ,

Mailing Address 745 Irving Street NW

City
Washington

State
DC

Zip Code
20010

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ASSOCIATE GENERAL COUNSEL I

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1372.60

Date of Receipt

10 / 31 / 2018

Transaction ID : SA11AI.206177

Amount of Each Receipt this Period

66.63

☐ Memo Item

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

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

91.63

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

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

A. ARTZ, MICHAEL, L., ,

Mailing Address 745 Irving Street NW

City
Washington

State
DC

Zip Code
20010

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ASSOCIATE GENERAL COUNSEL I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1439.23

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206530

Amount of Each Receipt this Period

66.63

☐ Memo Item

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

B. ASAHARA, ELIZABETH L., ,

Mailing Address 902 Hoalauna Way

City
Hilo

State
HI

Zip Code
96720

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI RET CHPT 152

Occupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211037

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. ASHBY, DANNA, L., ,

Mailing Address 1004 S 18th Street

City
Harrisburg

State
PA

Zip Code
17104

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

242.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206977

Amount of Each Receipt this Period

22.00

☐ Memo Item

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

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

108.63

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

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

A. ASHFORD, JESSICA, J., ,

Mailing Address 1500 Old Hickory Drive

City
Columbus

State
OH

Zip Code
43223

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
CUSTOMER SERVICE REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.209979

Amount of Each Receipt this Period

8.50

☐ Memo Item

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

B. ASKELIN, LAURA, M., ,

Mailing Address 1031 4th Avenue S.E.

City
Rochester

State
MN

Zip Code
55904

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/CN14

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

681.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211629

Amount of Each Receipt this Period

70.69

☐ Memo Item

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

C. ASORO, DESIREE, D., ,

Mailing Address 2334 Sunshine Place

City
Columbus

State
OH

Zip Code
43232

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
SR FINANCIAL ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208717

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

89.19

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

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

A. ASORO, DESIREE, D., ,

Mailing Address 2334 Sunshine Place

City
Columbus

State
OH

Zip Code
43232

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
SR FINANCIAL ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209348

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. ASORO, DESIREE, D., ,

Mailing Address 2334 Sunshine Place

City
Columbus

State
OH

Zip Code
43232

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
SR FINANCIAL ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.209980

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. ATKINS, DARRIN, , ,

Mailing Address 300 W. Caton Farm
#17

City
Lockport

State
IL

Zip Code
60441

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
CORRECTIONAL OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

333.28

Date of Receipt

10 / 18 / 2018

Transaction ID : SA11AI.210763

Amount of Each Receipt this Period

41.66

☐ Memo Item

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

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

61.66

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

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

FOR LINE NUMBER: PAGE 49 OF 1411

(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. ATKINS, DARRIN, , ,

Mailing Address 300 W. Caton Farm
#17

City
Lockport

State
IL

Zip Code
60441

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
CORRECTIONAL OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.94

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208115

Amount of Each Receipt this Period

41.66

☐ Memo Item

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

B. AUVE, DENISE, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 09 / 2018

Transaction ID : SA11AI.207557

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. AUVE, DENISE, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 26 / 2018

Transaction ID : SA11AI.207763

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

61.66

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 50 OF 1411

(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. AVALOS, MARIANO, G., ,

Mailing Address 8160 Wakefield Avenue

City

Panorama City

State

CA

Zip Code

91402

FEC ID number of contributing
federal political committee.

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ORGANIZER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.206178

Amount of Each Receipt this Period

☐ Memo Item

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

B. AVALOS, MARIANO, G., ,

Mailing Address 8160 Wakefield Avenue

City

Panorama City

State

CA

Zip Code

91402

FEC ID number of contributing
federal political committee.

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ORGANIZER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.206531

Amount of Each Receipt this Period

☐ Memo Item

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

C. AVILA, MARIA, J., ,

Mailing Address 2122 S Shelton Street

City

Santa Ana

State

CA

Zip Code

92707

FEC ID number of contributing
federal political committee.

Name of Employer (for Individual)

AFSCME CA LOC 3930

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.211257

Amount of Each Receipt this Period

☐ Memo Item

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

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

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

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

FOR LINE NUMBER: PAGE 51 OF 1411

(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. AVILA, MARIA, J., ,			Date of Receipt M M / D D / Y Y Y Y Y 11 / 07 / 2018 Transaction ID : SA11AI.211138	
Mailing Address 2122 S Shelton Street			Amount of Each Receipt this Period 28.00	
City Santa Ana	State CA	Zip Code 92707	☐ Memo Item	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 308.00	
Name of Employer (for Individual) AFSCME CA LOC 3930			Occupation (for Individual) STAFF REPRESENTATIVE	
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼				
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BACANI, JAN, , ,			Date of Receipt M M / D D / Y Y Y Y Y 10 / 19 / 2018 Transaction ID : SA11AI.211055	
Mailing Address 7846 Woodlake Avenue			Amount of Each Receipt this Period 10.00	
City West Hills	State CA	Zip Code 91304	☐ Memo Item	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 220.00	
Name of Employer (for Individual) AFSCME CA LOC 1902			Occupation (for Individual) STAFF REPRESENTATIVE	
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼				
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. BACANI, JAN, , ,			Date of Receipt M M / D D / Y Y Y Y Y 11 / 07 / 2018 Transaction ID : SA11AI.211076	
Mailing Address 7846 Woodlake Avenue			Amount of Each Receipt this Period 10.00	
City West Hills	State CA	Zip Code 91304	☐ Memo Item	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 230.00	
Name of Employer (for Individual) AFSCME CA LOC 1902			Occupation (for Individual) STAFF REPRESENTATIVE	
Receipt For: ☐ Primary ☐ General ☐ Other (specify)				
SUBTOTAL of Receipts This Page (optional)..... ▶			48.00	
TOTAL This Period (last page this line number only)..... ▶				

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

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

FEC Schedule A (Form 3X) Rev. 06/2016

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 53 OF 1411

(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. BADILLO, ROBERT, S., ,

 Mailing Address 70 I Street SE
 Apt. 736

 City
 Washington

 State
 DC

 Zip Code
 20003

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME INT'L

 Occupation (for Individual)
 SYSTEMS SUPPORT ANALYST I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.206180

Amount of Each Receipt this Period

☐ Memo Item

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

B. BADILLO, ROBERT, S., ,

 Mailing Address 70 I Street SE
 Apt. 736

 City
 Washington

 State
 DC

 Zip Code
 20003

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME INT'L

 Occupation (for Individual)
 SYSTEMS SUPPORT ANALYST I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.206533

Amount of Each Receipt this Period

☐ Memo Item

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

C. BADUA, PRISCILLA, A., ,

Mailing Address P.O. Box 390

 City
 Hanapepe

 State
 HI

 Zip Code
 96716-0390

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME HI LOC 152

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.210982

Amount of Each Receipt this Period

☐ Memo Item

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

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

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

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

FOR LINE NUMBER: PAGE 54 OF 1411

(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. BAILEY, DAWN, M., ,

Mailing Address 4060 LaPlante Road

City
Monclova

State
OH

Zip Code
43542

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

723.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210861

Amount of Each Receipt this Period

66.64

☐ Memo Item

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

B. BAILEY, DAWN, M., ,

Mailing Address 711 Seneca Street NE

City
Massillon

State
OH

Zip Code
44646

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209349

Amount of Each Receipt this Period

9.00

☐ Memo Item

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

C. BAILEY, DAWN, M., ,

Mailing Address 711 Seneca Street NE

City
Massillon

State
OH

Zip Code
44646

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.209982

Amount of Each Receipt this Period

9.00

☐ Memo Item

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

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

84.64

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

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

A. BAILEY, KENNETH, , ,

Mailing Address 1034 N. Washington Avenue

City
Lansing

State
MI

Zip Code
48906

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MI CN 25

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211331

Amount of Each Receipt this Period

10.50

☐ Memo Item

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

B. BAILEY, KENNETH, , ,

Mailing Address 1034 N. Washington Avenue

City
Lansing

State
MI

Zip Code
48906

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MI CN 25

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 20 / 2018

Transaction ID : SA11AI.211376

Amount of Each Receipt this Period

10.50

☐ Memo Item

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

C. BAIR, THERESA, A., ,

Mailing Address 513 Depot Street

City
Williamsport

State
PA

Zip Code
17701

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206978

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

61.00

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

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

A. **BAKER, ALLYSON, , ,**

Mailing Address 1212 Jefferson Street SE

 City
 Olympia

 State
 WA

 Zip Code
 98501

FEC ID number of contributing federal political committee.

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	D D	Y Y Y Y
10	25	2018

Transaction ID : SA11AI.207357

Amount of Each Receipt this Period

☐ Memo Item

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

B. **BAKER, ALLYSON, , ,**

Mailing Address 1212 Jefferson Street SE

 City
 Olympia

 State
 WA

 Zip Code
 98501

FEC ID number of contributing federal political committee.

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	D D	Y Y Y Y
11	09	2018

Transaction ID : SA11AI.207558

Amount of Each Receipt this Period

☐ Memo Item

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

C. **BAKER, ALLYSON, , ,**

Mailing Address 1212 Jefferson Street SE

 City
 Olympia

 State
 WA

 Zip Code
 98501

FEC ID number of contributing federal political committee.

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	D D	Y Y Y Y
11	26	2018

Transaction ID : SA11AI.207764

Amount of Each Receipt this Period

☐ Memo Item

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
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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

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

A. BALAS, MATTHEW, , ,

Mailing Address 307 Adams Street

 City
 Freeland

 State
 PA

 Zip Code
 18224

 FEC ID number of contributing
 federal political committee.

Name of Employer (for Individual)

AFSCME PA CN 13

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.206979

Amount of Each Receipt this Period

☐ Memo Item

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

B. BALDWIN, JOYA, S., ,

Mailing Address 5040 Godown Road

 City
 Columbus

 State
 OH

 Zip Code
 43220

 FEC ID number of contributing
 federal political committee.

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

FINANCIAL ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.208719

Amount of Each Receipt this Period

☐ Memo Item

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

C. BALDWIN, JOYA, S., ,

Mailing Address 5040 Godown Road

 City
 Columbus

 State
 OH

 Zip Code
 43220

 FEC ID number of contributing
 federal political committee.

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

FINANCIAL ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.209350

Amount of Each Receipt this Period

☐ Memo Item

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

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

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

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

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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

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

A. BALDWIN, JOYA, S., ,

Mailing Address 5040 Godown Road

City
Columbus

State
OH

Zip Code
43220

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
FINANCIAL ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.209983

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. BALDWIN, SCOTT, , ,

Mailing Address 2521 Shawnee Drive

City
Springfield

State
IL

Zip Code
62702

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
INFORMATION SYSTEMS ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

11 / 05 / 2018

Transaction ID : SA11AI.208117

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

C. BALL, ANGELA, S., ,

Mailing Address 237 52nd Street SW

City
Canton

State
OH

Zip Code
44706

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
WORKERS COMP CLAIMS ADJUSTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

204.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.209984

Amount of Each Receipt this Period

8.50

☐ Memo Item

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

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

58.50

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

FOR LINE NUMBER: PAGE 59 OF 1411

(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. BALLAH-SWARAY, VIVIAN, K., ,

Mailing Address 11112 Hillsboro Avenue N.

City
ChamplinState
MNZip Code
55316FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MNOccupation (for Individual)
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
11			01			2018			

Transaction ID : SA11AI.211630

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. BALTICH, GRACE, A., ,

Mailing Address 11711 Douglas Drive N

City
ChamplinState
MNZip Code
55316FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

567.76

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2018			

Transaction ID : SA11AI.211631

Amount of Each Receipt this Period

69.24

☐ Memo Item

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

C. BANKS, LEE, R., , JR.

Mailing Address 243 Orchard Drive

City
Park ForestState
ILZip Code
60466FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

208.40

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2018			

Transaction ID : SA11AI.208118

Amount of Each Receipt this Period

20.84

☐ Memo Item

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

120.08

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

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

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

FOR LINE NUMBER: PAGE 60 OF 1411

(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. BARBER, ELAINE, , ,

Mailing Address 1826 Forster Street

City
Harrisburg

State
PA

Zip Code
17103

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 ▼

853.77

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.206980

Amount of Each Receipt this Period

78.42

☐ Memo Item

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

B. BARKER, KENNETH, I., ,

Mailing Address 643 Nelson Street

City
Elyria

State
OH

Zip Code
44035

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 ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.209985

Amount of Each Receipt this Period

8.50

☐ Memo Item

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

C. BARNARD, TERRI, L., ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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 Y
10 / 25 / 2018

Transaction ID : SA11AI.207358

Amount of Each Receipt this Period

21.00

☐ Memo Item

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

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

107.92

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

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

FOR LINE NUMBER: PAGE 61 OF 1411

(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. BARNARD, TERRI, L., ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.207559

Amount of Each Receipt this Period

21.00

☐ Memo Item

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

B. BARNARD, TERRI, L., ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.00

Date of Receipt

11 / 26 / 2018

Transaction ID : SA11AI.207765

Amount of Each Receipt this Period

21.00

☐ Memo Item

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

C. BARNES, RENEE, , ,

Mailing Address 6905 Bankrun Terrace

City
District Heights

State
MD

Zip Code
20747

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
EXECUTIVE OFFICE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

835.41

Date of Receipt

10 / 31 / 2018

Transaction ID : SA11AI.206183

Amount of Each Receipt this Period

41.78

☐ Memo Item

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

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

83.78

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 62 OF 1411

(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. BARNES, RENEE, , ,

Mailing Address 6905 Bankrun Terrace

City

District Heights

State

MD

Zip Code

20747

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

EXECUTIVE OFFICE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

877.19

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 11 / 15 / 2018

Transaction ID : SA11AI.206536

Amount of Each Receipt this Period

41.78

☐ Memo Item

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

B. BARNES, SHERRI, , ,

Mailing Address 7753 Belvedere Place

City

Rancho Cucamonga

State

CA

Zip Code

91730

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME CA LOC 1902

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 10 / 19 / 2018

Transaction ID : SA11AI.211056

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. BARNES, SHERRI, , ,

Mailing Address 7753 Belvedere Place

City

Rancho Cucamonga

State

CA

Zip Code

91730

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME CA LOC 1902

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 11 / 07 / 2018

Transaction ID : SA11AI.211077

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

81.78

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

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

FOR LINE NUMBER: PAGE 63 OF 1411

(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. BARNES, SHERRI, , ,

Mailing Address 7753 Belvedere Place

City

Rancho Cucamonga

State

CA

Zip Code

91730

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME CA LOC 1902

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

445.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	20	/	2018

Transaction ID : SA11AI.211098

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

B. BARNETT, JULIE, , ,

Mailing Address 4301 Executive Park Drive

City

Harrisburg

State

PA

Zip Code

17111

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME PA CN 13

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

538.34

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	08	/	2018

Transaction ID : SA11AI.206981

Amount of Each Receipt this Period

48.94

☐ Memo Item

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

C. BARONA-KAHOONEI, ALVIN, , ,

Mailing Address 2933 Pulima Drive

City

Hilo

State

HI

Zip Code

96720

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME HI LOC 646

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

458.48

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.211278

Amount of Each Receipt this Period

41.68

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

110.62

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

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

FOR LINE NUMBER: PAGE 64 OF 1411

(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. **BARONE, JERRY, P., ,**

Mailing Address 144 George Street

City
Throop

State
PA

Zip Code
18512

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)
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
10 / 31 / 2018

Transaction ID : SA11AI.206982

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

B. **BARRETT, RONALD, L., ,**

Mailing Address 417 Washington Street

City

New Bethlehem

State

PA

Zip Code

16242

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)
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
10 / 31 / 2018

Transaction ID : SA11AI.206983

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. **BARTELS, TRAVIS, B., ,**

Mailing Address 2883 Sawyer Road SW

City

Bemidji

State

MN

Zip Code

56601

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
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
11 / 01 / 2018

Transaction ID : SA11AI.211632

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

60.00

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 65 OF 1411

(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. BARTLETT, ANDREW, M, ,

Mailing Address 1010 192nd Street

City
Boone

State
IA

Zip Code
50036

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)
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
10 / 18 / 2018

Transaction ID : SA11AI.211829

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. BARTLETT, ANDREW, M, ,

Mailing Address 1010 192nd Street

City
Boone

State
IA

Zip Code
50036

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)
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
10 / 26 / 2018

Transaction ID : SA11AI.211886

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. BARTLETT, MARKUS, K., ,

Mailing Address 3306 Estrellita Drive

City
Roswell

State
NM

Zip Code
88201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ORGANIZER IN TRAINING

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

722.81

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206184

Amount of Each Receipt this Period

37.00

☐ Memo Item

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

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

57.00

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

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

FOR LINE NUMBER: PAGE 66 OF 1411

(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. BARTLETT, MARKUS, K., ,

Mailing Address 3306 Estrellita Drive

City
Roswell

State
NM

Zip Code
88201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ORGANIZER IN TRAINING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

759.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206537

Amount of Each Receipt this Period

37.00

☐ Memo Item

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

B. BARTON, JANNIE, C., ,

Mailing Address 381 Woodland Avenue

City
Toledo

State
OH

Zip Code
43604

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 ▼

207.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209353

Amount of Each Receipt this Period

9.00

☐ Memo Item

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

C. BARTON, JANNIE, C., ,

Mailing Address 381 Woodland Avenue

City
Toledo

State
OH

Zip Code
43604

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 ▼

216.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.209986

Amount of Each Receipt this Period

9.00

☐ Memo Item

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

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

55.00

x	11a	11b	11c	12	
	13	14	15	16	17

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

FEC Schedule A (Form 3X) Rev. 06/2016

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

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

FOR LINE NUMBER: PAGE 68 OF 1411

(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. BASS, CHERYL, E., ,

Mailing Address 1635 Worthington Club Drive

City
Westerville

State
OH

Zip Code
43081

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
CUSTOMER SERVICES ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209354

Amount of Each Receipt this Period

14.00

☐ Memo Item

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

B. BASS, CHERYL, E., ,

Mailing Address 1635 Worthington Club Drive

City
Westerville

State
OH

Zip Code
43081

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
CUSTOMER SERVICES ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.209987

Amount of Each Receipt this Period

14.00

☐ Memo Item

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

C. BASS, KATHLEEN, M., ,

Mailing Address 408 West Beacon Court

City
Mount Vernon

State
IL

Zip Code
62864

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 ▼

399.84

Date of Receipt

11 / 05 / 2018

Transaction ID : SA11AI.208119

Amount of Each Receipt this Period

38.08

☐ Memo Item

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

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

66.08

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

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

FOR LINE NUMBER: PAGE 69 OF 1411

(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. **BASTIANELLI, FATIMA, A, ,**

Mailing Address 5604 Vernon Place

City
Bethesda

State
MD

Zip Code
20817

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

POLITICAL ACTION POLLING ASSIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206185

Amount of Each Receipt this Period

45.28

☐ Memo Item

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

B. **BASTIANELLI, FATIMA, A, ,**

Mailing Address 5604 Vernon Place

City
Bethesda

State
MD

Zip Code
20817

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

POLITICAL ACTION POLLING ASSIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

945.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206538

Amount of Each Receipt this Period

45.28

☐ Memo Item

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

C. **BATCHELDER, MICHAEL, , ,**

Mailing Address 56 W. Dodridge Street

City
Columbus

State
OH

Zip Code
43202

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH CN 8

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

763.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210862

Amount of Each Receipt this Period

69.70

☐ Memo Item

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

160.26

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

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

FOR LINE NUMBER: PAGE 70 OF 1411

(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. BATER, LAWRENCE, , ,

Mailing Address 1209 Serpentine Drive

City
RedlandsState
CAZip Code
92373FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 1902Occupation (for Individual)
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
10	19	2018

Transaction ID : SA11AI.211057

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. BATER, LAWRENCE, , ,

Mailing Address 1209 Serpentine Drive

City
RedlandsState
CAZip Code
92373FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 1902Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M	D D	Y Y Y Y
11	07	2018

Transaction ID : SA11AI.211078

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. BATER, LAWRENCE, , ,

Mailing Address 1209 Serpentine Drive

City
RedlandsState
CAZip Code
92373FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 1902Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M	D D	Y Y Y Y
11	20	2018

Transaction ID : SA11AI.211099

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

30.00

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 71 OF 1411

(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. BATES, JAVON, , ,

Mailing Address 9617 Chamberlin Road

City
Twinsburg

State
OH

Zip Code
44087

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209355

Amount of Each Receipt this Period

9.00

☐ Memo Item

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

B. BATES, JAVON, , ,

Mailing Address 9617 Chamberlin Road

City
Twinsburg

State
OH

Zip Code
44087

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.209988

Amount of Each Receipt this Period

9.00

☐ Memo Item

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

C. BATES, LINDA, , ,

Mailing Address 1510 Walnut Street

City
Woodbridge

State
VA

Zip Code
22191

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
EXECUTIVE OFFICE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

885.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206186

Amount of Each Receipt this Period

43.01

☐ Memo Item

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

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

61.01

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 72 OF 1411
(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. BATES, LINDA, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 1510 Walnut Street City Woodbridge State VA Zip Code 22191 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME INT'L Occupation (for Individual) EXECUTIVE OFFICE ASSISTANT Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 928.21			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 15 / 2018 Transaction ID : SA11AI.206539 Amount of Each Receipt this Period 43.01 ☐ Memo Item
B. BATIE, KENNETH, L., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 7105 Intrepid Lane City Gaithersburg State MD Zip Code 20879 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME INT'L Occupation (for Individual) STAFF ACCOUNTANT III Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 1104.64			Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 31 / 2018 Transaction ID : SA11AI.206187 Amount of Each Receipt this Period 53.05 ☐ Memo Item
C. BATIE, KENNETH, L., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 7105 Intrepid Lane City Gaithersburg State MD Zip Code 20879 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME INT'L Occupation (for Individual) STAFF ACCOUNTANT III Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 1157.69			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 15 / 2018 Transaction ID : SA11AI.206540 Amount of Each Receipt this Period 53.05 ☐ Memo Item
SUBTOTAL of Receipts This Page (optional)..... ▶			149.11
TOTAL This Period (last page this line number only)..... ▶			

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

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

FOR LINE NUMBER: PAGE 73 OF 1411

(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. BAUER, STEVEN, A., ,

Mailing Address 632 Walnut Drive N

City
Mansfield

State
OH

Zip Code
44904

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
HIGHWAY TECHNICIAN II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208725

Amount of Each Receipt this Period

14.50

☐ Memo Item

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

B. BAUER, STEVEN, A., ,

Mailing Address 632 Walnut Drive N

City
Mansfield

State
OH

Zip Code
44904

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
HIGHWAY TECHNICIAN II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209356

Amount of Each Receipt this Period

14.50

☐ Memo Item

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

C. BAUER, STEVEN, A., ,

Mailing Address 632 Walnut Drive N

City
Mansfield

State
OH

Zip Code
44904

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
HIGHWAY TECHNICIAN II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.209989

Amount of Each Receipt this Period

14.50

☐ Memo Item

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

43.50

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 74 OF 1411

(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. BAXTER, LYNDON, L., ,

Mailing Address 2181 W Junction Road

City
Chillicothe

State
OH

Zip Code
45601

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
HIGHWAY TECHNICIAN II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208726

Amount of Each Receipt this Period

14.00

☐ Memo Item

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

B. BAXTER, LYNDON, L., ,

Mailing Address 2181 W Junction Road

City
Chillicothe

State
OH

Zip Code
45601

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
HIGHWAY TECHNICIAN II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209357

Amount of Each Receipt this Period

14.00

☐ Memo Item

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

C. BAXTER, LYNDON, L., ,

Mailing Address 2181 W Junction Road

City
Chillicothe

State
OH

Zip Code
45601

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
HIGHWAY TECHNICIAN II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.209990

Amount of Each Receipt this Period

14.00

☐ Memo Item

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

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

42.00

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

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

FOR LINE NUMBER: PAGE 75 OF 1411

(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. BAYER, HENRY, , ,

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 (for Individual)
AFSCME INT'L/STATE STREET

Occupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1117.99

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 02 / 2018

Transaction ID : SA11AI.206541

Amount of Each Receipt this Period

102.31

☐ Memo Item

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

B. BEARD, DEBRA, , ,

Mailing Address 118 Liberty Street

City
Waukegan

State
IL

Zip Code
60085

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
MENTAL HEALTH TECH I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.82

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208120

Amount of Each Receipt this Period

31.26

☐ Memo Item

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

C. BEASLEY, DELORES, A., ,

Mailing Address 4214 Nevada Avenue

City
Dayton

State
OH

Zip Code
45416

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208727

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

143.57

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

FOR LINE NUMBER: PAGE 76 OF 1411

(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. BEASLEY, DELORES, A., ,

Mailing Address 4214 Nevada Avenue

City
DaytonState
OHZip Code
45416FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.209358

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. BEASLEY, DELORES, A., ,

Mailing Address 4214 Nevada Avenue

City
DaytonState
OHZip Code
45416FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.209991

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. BEATTY, KYLE, , ,

Mailing Address 5864 Mindy Drive

City
HamiltonState
OHZip Code
45011FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

616.36

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2018

Transaction ID : SA11AI.210863

Amount of Each Receipt this Period

57.24

☐ Memo Item

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

77.24

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

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

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

FOR LINE NUMBER: PAGE 77 OF 1411

(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. BEAUCHAMP, KENT, , ,

Mailing Address 2309 Mariners Point Lane

City
Springfield

State
IL

Zip Code
62712

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31

Occupation (for Individual)
REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

942.02

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208121

Amount of Each Receipt this Period

94.20

☐ Memo Item

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

B. BEAVIN, VERONICA, L., ,

Mailing Address 10205 Bluff Springs Trace

City
Louisville

State
KY

Zip Code
40223

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ASSISTANT DIRECTOR, EDUCATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1881.20

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206188

Amount of Each Receipt this Period

94.06

☐ Memo Item

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

C. BEAVIN, VERONICA, L., ,

Mailing Address 10205 Bluff Springs Trace

City
Louisville

State
KY

Zip Code
40223

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ASSISTANT DIRECTOR, EDUCATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1975.26

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206542

Amount of Each Receipt this Period

94.06

☐ Memo Item

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

282.32

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

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

FOR LINE NUMBER: PAGE 78 OF 1411

(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. BECK, DAVID, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 29 N. Wacker Drive Suite 800 City Chicago State IL Zip Code 60606 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME IL CN 31 Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 762.79		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 05 / 2018 Transaction ID : SA11AI.208122 Amount of Each Receipt this Period 76.28 ☐ Memo Item
B. BECKER, CRAIG, F., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 504 North 4th Street City Savanna State IL Zip Code 61074 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME IL RET CHPT 31 Occupation (for Individual) RETIREE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 05 / 2018 Transaction ID : SA11AI.208393 Amount of Each Receipt this Period 21.00 ☐ Memo Item
C. BECKLEY, TOREY, L., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 154 Hamilton Street City Bellevue State OH Zip Code 44811 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH Occupation (for Individual) STOREKEEPER I Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 204.00		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 23 / 2018 Transaction ID : SA11AI.209992 Amount of Each Receipt this Period 8.50 ☐ Memo Item
SUBTOTAL of Receipts This Page (optional)..... ▶		105.78
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 79 OF 1411

(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. BEEBE, BRENT, E., , Mailing Address 9817 Belhaven Road City Bethesda State MD Zip Code 20817 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME INT'L Occupation (for Individual) FIELD AUDITOR II Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 974.52			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2018 Transaction ID : SA11AI.206189 Amount of Each Receipt this Period 49.02 ☐ Memo Item		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BEEBE, BRENT, E., , Mailing Address 9817 Belhaven Road City Bethesda State MD Zip Code 20817 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME INT'L Occupation (for Individual) FIELD AUDITOR II Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 1023.54			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 15 / 2018 Transaction ID : SA11AI.206543 Amount of Each Receipt this Period 49.02 ☐ Memo Item		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. BEGATTO, MICHAEL, , , Mailing Address 301 Hedgerow Lane City Wilmington State DE Zip Code 19807 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME DE CN 81 Occupation (for Individual) EXECUTIVE DIRECTOR Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 1068.12			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 19 / 2018 Transaction ID : SA11AI.211260 Amount of Each Receipt this Period 98.40 ☐ Memo Item		
SUBTOTAL of Receipts This Page (optional)..... ▶			196.44		
TOTAL This Period (last page this line number only)..... ▶					

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

FOR LINE NUMBER: PAGE 80 OF 1411

(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. BEGATTO, MICHAEL, , ,

Mailing Address 301 Hedgerow Lane

City
WilmingtonState
DEZip Code
19807FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME DE CN 81Occupation (for Individual)
EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1166.52

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	14	2018

Transaction ID : SA11AI.211267

Amount of Each Receipt this Period

98.40

☐ Memo Item

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

B. BELKE, MARY, A., ,

Mailing Address P.O. Box 73

City
ElkhartState
ILZip Code
62624FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
HUMAN SERVICES CASEWORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.40

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208123

Amount of Each Receipt this Period

31.26

☐ Memo Item

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

C. BELL, SABRINA, S., ,

Mailing Address 23787 US Route 30

City
MinervaState
OHZip Code
44657FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.208729

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

139.66

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 81 OF 1411
(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. BELL, SABRINA, S., ,

Mailing Address 23787 US Route 30

City
MinervaState
OHZip Code
44657FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209360

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. BELL, SABRINA, S., ,

Mailing Address 23787 US Route 30

City
MinervaState
OHZip Code
44657FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.209993

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. BELLA, JOSEPH, , ,

Mailing Address 501 W George Street

City
Arlington HeightsState
ILZip Code
60005FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31Occupation (for Individual)
REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

942.02

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208124

Amount of Each Receipt this Period

94.20

☐ Memo Item

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

114.20

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

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

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

FOR LINE NUMBER: PAGE 82 OF 1411

(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. BELNA, CHRISTINE, L., ,

Mailing Address 452 Scandia Street

City
Blacklick

State
OH

Zip Code
43004

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
LABORATORY SCIENTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208730

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

B. BELNA, CHRISTINE, L., ,

Mailing Address 452 Scandia Street

City
Blacklick

State
OH

Zip Code
43004

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
LABORATORY SCIENTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209361

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. BELNA, CHRISTINE, L., ,

Mailing Address 452 Scandia Street

City
Blacklick

State
OH

Zip Code
43004

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
LABORATORY SCIENTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.209994

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

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

60.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 83 OF 1411

(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. BENDER, ROXANNE, C., ,

Mailing Address 6188 North Street

 City
 El Dorado

 State
 CA

 Zip Code
 95623

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME CA LOC 3930

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	07	2018

Transaction ID : SA11AI.211140

Amount of Each Receipt this Period

☐ Memo Item

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

B. BENNER, PETER, J., ,

Mailing Address 7650 Cahill Avenue

 City
 Inver Grove Hgts.

 State
 MN

 Zip Code
 55076

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME INT'L/STATE STREET

 Occupation (for Individual)
 RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	02	2018

Transaction ID : SA11AI.206544

Amount of Each Receipt this Period

☐ Memo Item

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

C. BENNETT, LINDA, , ,

Mailing Address 4349 Yuma Street NW

 City
 Washington

 State
 DC

 Zip Code
 20016

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME INT'L

 Occupation (for Individual)
 LEGISLATIVE AFFAIRS SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206190

Amount of Each Receipt this Period

☐ Memo Item

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

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

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 84 OF 1411

(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. BENNETT, LINDA, , ,

Mailing Address 4349 Yuma Street NW

City
WashingtonState
DCZip Code
20016FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

LEGISLATIVE AFFAIRS SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1112.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206545

Amount of Each Receipt this Period

53.05

☐ Memo Item

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

B. BENNETT, RANDOLPH, G., ,

Mailing Address 415 N Market Street

City
GalionState
OHZip Code
44833FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209362

Amount of Each Receipt this Period

9.00

☐ Memo Item

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

C. BENNETT, RANDOLPH, G., ,

Mailing Address 415 N Market Street

City
GalionState
OHZip Code
44833FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.209995

Amount of Each Receipt this Period

9.00

☐ Memo Item

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

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

71.05

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

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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

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

A. BENSHOOF, DAN, , ,

Mailing Address 4320 NW Second Avenue

City
Des MoinesState
IAZip Code
50313FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/POLK COUNTYOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

438.79

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		1	9		2	0	1	8		

Transaction ID : SA11AI.211940

Amount of Each Receipt this Period

15.41

☐ Memo Item

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

B. BENSHOOF, DAN, , ,

Mailing Address 4320 NW Second Avenue

City
Des MoinesState
IAZip Code
50313FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/POLK COUNTYOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

454.20

Date of Receipt

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

Transaction ID : SA11AI.211941

Amount of Each Receipt this Period

15.41

☐ Memo Item

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

C. BENSHOOF, DAN, , ,

Mailing Address 4320 NW Second Avenue

City
Des MoinesState
IAZip Code
50313FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/POLK COUNTYOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

469.61

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		0	9		2	0	1	8		

Transaction ID : SA11AI.211942

Amount of Each Receipt this Period

15.41

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

46.23

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

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

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

FOR LINE NUMBER: PAGE 86 OF 1411

(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. BENSON-TAYLOR, STACEY, D., ,

Mailing Address 241 Brooklyn Avenue

City
Dayton

State
OH

Zip Code
45417

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1029.10

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210864

Amount of Each Receipt this Period

93.98

☐ Memo Item

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

B. BENYARD, WILLIAM, B., ,

Mailing Address 123 Briar Heath Circle

City
Dayton

State
OH

Zip Code
45415

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
INFRASTRUCTURE SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.209996

Amount of Each Receipt this Period

8.50

☐ Memo Item

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

C. BENZELESKI, NORMAN, , ,

Mailing Address 4301 Executive Park Drive

City
Harrisburg

State
PA

Zip Code
17111

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

473.44

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.206984

Amount of Each Receipt this Period

43.04

☐ Memo Item

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

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

145.52

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

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

FEC Schedule A (Form 3X) Rev. 06/2016

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

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

FOR LINE NUMBER: PAGE 88 OF 1411

(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. BETTENCOURT, ELIZABETH, , , Mailing Address 2452 Whitehorne Drive City San Jose State CA Zip Code 95128 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME CA CN 57 Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 585.00			Date of Receipt 10 / 22 / 2018 Transaction ID : SA11AI.211205 Amount of Each Receipt this Period 30.00 ☐ Memo Item	
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BETTENCOURT, ELIZABETH, , , Mailing Address 2452 Whitehorne Drive City San Jose State CA Zip Code 95128 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME CA CN 57 Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 615.00			Date of Receipt 10 / 31 / 2018 Transaction ID : SA11AI.211206 Amount of Each Receipt this Period 30.00 ☐ Memo Item	
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. BETTENCOURT, ELIZABETH, , , Mailing Address 2452 Whitehorne Drive City San Jose State CA Zip Code 95128 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME CA CN 57 Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 645.00			Date of Receipt 11 / 14 / 2018 Transaction ID : SA11AI.211223 Amount of Each Receipt this Period 30.00 ☐ Memo Item	
SUBTOTAL of Receipts This Page (optional)..... ▶			90.00	
TOTAL This Period (last page this line number only)..... ▶				

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

Use separate schedule(s)
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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

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

A. BEVERLY, JAMES, , ,

Mailing Address 390 Worthington Road

City

Westerville

State

OH

Zip Code

43082

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.209998

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

B. BEVERLY, JAMES, , , Jr.

Mailing Address 390 Worthington Road

City

Westerville

State

OH

Zip Code

43082

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11

Occupation (for Individual)

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 Y Y
11 / 06 / 2018

Transaction ID : SA11AI.209999

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

C. BEVLY, BRENDA, J., ,

Mailing Address 340 Porter Avenue

City

Campbell

State

OH

Zip Code

44405

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 ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210000

Amount of Each Receipt this Period

8.50

☐ Memo Item

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

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

68.50

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

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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

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

A. BIDEL-NIYAT, SHIRIN, , ,

Mailing Address 1330 New Hampshire Avenue NW
#403

City
Washington

State
DC

Zip Code
20036

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
REGIONAL FIELD MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1114.81

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206192

Amount of Each Receipt this Period

53.32

☐ Memo Item

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

B. BIDEL-NIYAT, SHIRIN, , ,

Mailing Address 1330 New Hampshire Avenue NW
#403

City
Washington

State
DC

Zip Code
20036

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
REGIONAL FIELD MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1168.13

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206547

Amount of Each Receipt this Period

53.32

☐ Memo Item

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

C. BIERBAUGH, WILLIAM, C., ,

Mailing Address 232 Danbury Road

City
W Jefferson

State
OH

Zip Code
43162

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208735

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

116.64

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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 Detailed Summary Page

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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

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

A. BIERBAUGH, WILLIAM, C., ,

Mailing Address 232 Danbury Road

 City
 W Jefferson

 State
 OH

 Zip Code
 43162

 FEC ID number of contributing
 federal political committee.

 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 ▼

Date of Receipt

 / /

Transaction ID : SA11AI.209366

Amount of Each Receipt this Period

☐ Memo Item

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

B. BIERBAUGH, WILLIAM, C., ,

Mailing Address 232 Danbury Road

 City
 W Jefferson

 State
 OH

 Zip Code
 43162

 FEC ID number of contributing
 federal political committee.

 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 ▼

Date of Receipt

 / /

Transaction ID : SA11AI.210001

Amount of Each Receipt this Period

☐ Memo Item

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

C. BILLENA, CHADWICK, K., ,

Mailing Address P.O. Box 6721

 City
 Hilo

 State
 HI

 Zip Code
 96720

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME HI LOC 152

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.210984

Amount of Each Receipt this Period

☐ Memo Item

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

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

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

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

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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

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

A. BILLIG, LOGAN, J., ,

Mailing Address 319 West Street

City
Bloomsburg

State
PA

Zip Code
17815

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206985

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

B. BILLINGER, JANE, M., ,

Mailing Address 1911 Westbridge Drive
#145

City
Annapolis

State
MD

Zip Code
21401

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
RESEARCH LIBRARIAN I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

828.66

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206193

Amount of Each Receipt this Period

32.73

☐ Memo Item

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

C. BILLINGER, JANE, M., ,

Mailing Address 1911 Westbridge Drive
#145

City
Annapolis

State
MD

Zip Code
21401

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
RESEARCH LIBRARIAN I

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

861.72

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206548

Amount of Each Receipt this Period

33.06

☐ Memo Item

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

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

105.79

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

Use separate schedule(s)
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Detailed Summary Page

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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

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

A. **BINDAS, DEBORAH, K., ,**

Mailing Address 901 North Road S.E.

City
NilesState
OHZip Code
44446FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH CN 8

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.14

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210865

Amount of Each Receipt this Period

22.74

☐ Memo Item

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

B. **BINDER, FELICIA, A., ,**

Mailing Address 1376 Todds Run Foster Road

City

Williamsburg

State

OH

Zip Code

45176

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208736

Amount of Each Receipt this Period

13.50

☐ Memo Item

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

C. **BINDER, FELICIA, A., ,**

Mailing Address 1376 Todds Run Foster Road

City

Williamsburg

State

OH

Zip Code

45176

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

310.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209367

Amount of Each Receipt this Period

13.50

☐ Memo Item

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

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

49.74

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

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

A. BINDER, FELICIA, A., ,

Mailing Address 1376 Todds Run Foster Road

City
Williamsburg

State
OH

Zip Code
45176

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210002

Amount of Each Receipt this Period

13.50

☐ Memo Item

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

B. BINDER, RONI, F ., ,

Mailing Address 103 S Locust
P.O. Box 405

City
New Berlin

State
IL

Zip Code
62670

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 ▼

209.66

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208125

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. BINGHAM, NOEL, , ,

Mailing Address 453 Conestoga Road

City
Wayne

State
PA

Zip Code
19087

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)
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 Y
10 / 31 / 2018

Transaction ID : SA11AI.206986

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

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

63.50

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

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

A. BIRCH, TIMOTHY, D., ,

Mailing Address 590 Middle Street
Apt. 603

City
Weymouth

State
MA

Zip Code
02189-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
INT'L UNION REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1010.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206194

Amount of Each Receipt this Period

45.72

☐ Memo Item

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

B. BIRCH, TIMOTHY, D., ,

Mailing Address 590 Middle Street
Apt. 603

City
Weymouth

State
MA

Zip Code
02189-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
INT'L UNION REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1056.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206549

Amount of Each Receipt this Period

45.84

☐ Memo Item

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

C. BIRD, JOANNE, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 25 / 2018

Transaction ID : SA11AI.207359

Amount of Each Receipt this Period

11.50

☐ Memo Item

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

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

103.06

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
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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. BIRD, JOANNE, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207560

Amount of Each Receipt this Period

11.50

☐ Memo Item

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

B. BIRD, JOANNE, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207766

Amount of Each Receipt this Period

11.50

☐ Memo Item

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

C. BIRO, SHERRI, , ,

Mailing Address P.O. Box 4023

City
Yakima

State
WA

Zip Code
98904

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 25 / 2018

Transaction ID : SA11AI.207360

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

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

43.00

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

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

Mailing Address P.O. Box 4023

City
Yakima

State
WA

Zip Code
98904

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207561

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

B. **BIRO, SHERRI, , ,**

Mailing Address P.O. Box 4023

City
Yakima

State
WA

Zip Code
98904

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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 Y
11 / 26 / 2018

Transaction ID : SA11AI.207767

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. **BISSEN, PAUL, , ,**

Mailing Address 1906 Bear Court SE

City
Rochester

State
MN

Zip Code
55904

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
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 Y
11 / 01 / 2018

Transaction ID : SA11AI.211633

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

80.00

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

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

A. BLACKBURN, MARIA, , ,

Mailing Address 14618 17th Avenue

City
Spanaway

State
WA

Zip Code
98387

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
SOCIAL WORKER 3

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207562

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. BLACKBURN, MARIA, , ,

Mailing Address 14618 17th Avenue

City
Spanaway

State
WA

Zip Code
98387

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
SOCIAL WORKER 3

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207768

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. BLACKERBY, RAYMOND, L., ,

Mailing Address 1340 Winesap Drive

City
Columbus

State
OH

Zip Code
43204

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
UNCLAIMED FUNDS AUDITOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208737

Amount of Each Receipt this Period

13.00

☐ Memo Item

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

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

33.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 99 OF 1411

(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. BLACKERBY, RAYMOND, L., ,

Mailing Address 1340 Winesap Drive

 City
 Columbus

 State
 OH

 Zip Code
 43204

 FEC ID number of contributing
 federal political committee.

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

 Occupation (for Individual)
 UNCLAIMED FUNDS AUDITOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.209368

Amount of Each Receipt this Period

☐ Memo Item

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

B. BLACKERBY, RAYMOND, L., ,

Mailing Address 1340 Winesap Drive

 City
 Columbus

 State
 OH

 Zip Code
 43204

 FEC ID number of contributing
 federal political committee.

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

 Occupation (for Individual)
 UNCLAIMED FUNDS AUDITOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.210003

Amount of Each Receipt this Period

☐ Memo Item

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

C. BLAIR, WALTER, , ,

 Mailing Address 900 S. Figueroa Street
 #602

 City
 Los Angeles

 State
 CA

 Zip Code
 90015

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME INT'L

 Occupation (for Individual)
 ASSISTANT REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.206195

Amount of Each Receipt this Period

☐ Memo Item

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

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

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

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

FOR LINE NUMBER: PAGE 100 OF 1411

(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. BLAIR, WALTER, , ,

Mailing Address 900 S. Figueroa Street
#602

City
Los Angeles

State
CA

Zip Code
90015

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ASSISTANT REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1271.66

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206551

Amount of Each Receipt this Period

57.82

☐ Memo Item

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

B. BLAKEY, ANTON, M., ,

Mailing Address 5407 Lees Crossing Drive
Apt. 5

City
Cincinnati

State
OH

Zip Code
45239

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH CN 8/CINCINNATTI CITY

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.88

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.210866

Amount of Each Receipt this Period

28.86

☐ Memo Item

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

C. BLANC, DONNA, J., ,

Mailing Address P.O. Box 415

City
Brownsville

State
WI

Zip Code
53006

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WI CN 32

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

227.80

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2018

Transaction ID : SA11AI.211431

Amount of Each Receipt this Period

22.78

☐ Memo Item

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

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

109.46

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

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

FOR LINE NUMBER: PAGE 101 OF 1411

(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. **BLANCHE, HEATHER, C., ,**

Mailing Address 3213 12th Street

City
Rock Island

State
IL

Zip Code
61201

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
PUBLIC SERVICE ADMIN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208126

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. **BLANFORD, WILLIAM, , ,**

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 09 / 2018

Transaction ID : SA11AI.207563

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. **BLANFORD, WILLIAM, , ,**

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 26 / 2018

Transaction ID : SA11AI.207769

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

50.00

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

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

A. BLANKENSHIP, LAURA, J., ,

Mailing Address 470 Glenmar Road

City
Glen Burnie

State
MD

Zip Code
21061

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MD CN 982

Occupation (for Individual)
CORRECTIONAL OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 19 / 2018

Transaction ID : SA11AI.211313

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

B. BLAYLOCK, SHAWN, K., ,

Mailing Address 241 W. Euclid Avenue

City
Springfield

State
OH

Zip Code
45506

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208738

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. BLAYLOCK, SHAWN, K., ,

Mailing Address 241 W. Euclid Avenue

City
Springfield

State
OH

Zip Code
45506

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 ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209369

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

60.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 103 OF 1411
(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 EFull Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. BLAYLOCK, SHAWN, K., ,

Mailing Address 241 W. Euclid Avenue

City
SpringfieldState
OHZip Code
45506FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			23			2018			

Transaction ID : SA11AI.210004

Amount of Each Receipt this Period

10.00

☐ Memo ItemFull Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. BLAZIER, JANE, E., ,

Mailing Address 9059 Terrell Road

City
AthensState
OHZip Code
45701FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
SENIOR FINANCIAL ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2018			

Transaction ID : SA11AI.208739

Amount of Each Receipt this Period

10.50

☐ Memo ItemFull Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. BLAZIER, JANE, E., ,

Mailing Address 9059 Terrell Road

City
AthensState
OHZip Code
45701FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
SENIOR FINANCIAL ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			09			2018			

Transaction ID : SA11AI.209370

Amount of Each Receipt this Period

10.50

☐ Memo Item

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

31.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 104 OF 1411
(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. BLAZIER, JANE, E., ,

Mailing Address 9059 Terrell Road

City
AthensState
OHZip Code
45701FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
SENIOR FINANCIAL ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			23			2018			

Transaction ID : SA11AI.210005

Amount of Each Receipt this Period

10.50

☐ Memo Item

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

B. BLEVINS, LISA, A., ,Mailing Address 11907 Tarragon Road
#G

City

Reisterstown

State
MDZip Code
21136FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
ADMINISTRATIVE ASSISTANT II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

827.60

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2018			

Transaction ID : SA11AI.206197

Amount of Each Receipt this Period

41.38

☐ Memo Item

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

C. BLEVINS, LISA, A., ,Mailing Address 11907 Tarragon Road
#G

City

Reisterstown

State
MDZip Code
21136FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
ADMINISTRATIVE ASSISTANT II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

868.98

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2018			

Transaction ID : SA11AI.206552

Amount of Each Receipt this Period

41.38

☐ Memo Item

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

93.26

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary 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

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

A. BLIESENER, MILLICENT, L., ,

Mailing Address 504 W Maple Avenue N

City
SpringfieldState
ILZip Code
62702FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208127

Amount of Each Receipt this Period

42.00

☐ Memo Item

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

B. BLINAS, PAUL, C., ,

Mailing Address 1917 Creston Avenue

City
ClevelandState
OHZip Code
44109FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210006

Amount of Each Receipt this Period

8.50

☐ Memo Item

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

C. BLINDAUER, HEIDI, L., ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.207564

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

60.50

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

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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

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

A. BLINDAUER, HEIDI, L., ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 26 / 2018

Transaction ID : SA11AI.207770

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. BLOEDE, DAVID, , ,

Mailing Address 7426 Harrison Street

City
Forest Park

State
IL

Zip Code
60130

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

654.27

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208128

Amount of Each Receipt this Period

65.68

☐ Memo Item

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

C. BLOOMINGDALE, KAREN, , ,

Mailing Address 4301 Executive Park Drive

City
Harrisburg

State
PA

Zip Code
17111

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

852.06

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.206987

Amount of Each Receipt this Period

77.46

☐ Memo Item

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

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

153.14

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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

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

A. BLOOMINGDALE, RICHARD, , ,

Mailing Address 5770 Nesbit Drive

City
HarrisburgState
PAZip Code
17112FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L/STATE STREETOccupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	02	2018

Transaction ID : SA11AI.206553

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. BLUMIN, MATTHEW, S., ,

Mailing Address 1336 Taylor Street NW

City
WashingtonState
DCZip Code
20036FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
ASSOCIATE GENERAL COUNSEL I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2565.25

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206198

Amount of Each Receipt this Period

33.31

☐ Memo Item

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

C. BLYTH, DAVID, L., ,

Mailing Address 1656 Gilbert Road

City
ToledoState
OHZip Code
43614FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

758.92

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	06	2018

Transaction ID : SA11AI.210867

Amount of Each Receipt this Period

69.26

☐ Memo Item

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

127.57

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

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

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

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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

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

A. BOATRIGHT, EUGENE, , ,

Mailing Address 8542 South Bishop

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

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

785.60

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208129

Amount of Each Receipt this Period

78.56

☐ Memo Item

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

B. BOBER, NADINE, L., ,

Mailing Address 547 Wilbor Avenue

City
Huron

State
OH

Zip Code
44839

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 ▼

374.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208741

Amount of Each Receipt this Period

17.00

☐ Memo Item

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

C. BOBER, NADINE, L., ,

Mailing Address 547 Wilbor Avenue

City
Huron

State
OH

Zip Code
44839

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 ▼

391.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209372

Amount of Each Receipt this Period

17.00

☐ Memo Item

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

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

112.56

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

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

A. BOBER, NADINE, L., ,

Mailing Address 547 Wilbor Avenue

City
Huron

State
OH

Zip Code
44839

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 ▼

408.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210007

Amount of Each Receipt this Period

17.00

☐ Memo Item

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

B. BODINE, CORINNE, J., ,

Mailing Address 3515 Spruce Sreet

City
Riverside

State
CA

Zip Code
92501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 3930

Occupation (for Individual)
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
11 / 07 / 2018

Transaction ID : SA11AI.211141

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. BOETTCHER, PATRICIA, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 09 / 2018

Transaction ID : SA11AI.207565

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

47.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 110 OF 1411
(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. BOETTCHER, PATRICIA, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
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
11			26			2018			

Transaction ID : SA11AI.207771

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. BOLIN, MARY, F., ,

Mailing Address 1092 Shinkle Ridge Road

City
GeorgetownState
OHZip Code
45121FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2018			

Transaction ID : SA11AI.208742

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. BOLIN, MARY, F., ,

Mailing Address 1092 Shinkle Ridge Road

City
GeorgetownState
OHZip Code
45121FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			09			2018			

Transaction ID : SA11AI.209373

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

30.00

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
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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. BOLIN, MARY, F., ,

Mailing Address 1092 Shinkle Ridge Road

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)
HOSPITAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210008

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. BOLINGER, THOMAS, W., ,

Mailing Address 850 S. Durkin Drive
Apt. 143

City
Springfield

State
IL

Zip Code
62704

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL RET CHPT 31

Occupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208394

Amount of Each Receipt this Period

42.00

☐ Memo Item

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

C. BOLLINGER, R. ALLAN, , ,

Mailing Address P.O. Box 577

City
Saint Paris

State
OH

Zip Code
43072

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
HIGHWAY TECHNICIAN III

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208743

Amount of Each Receipt this Period

14.50

☐ Memo Item

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

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

66.50

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
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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. BOLLINGER, R. ALLAN, , ,

Mailing Address P.O. Box 577

City
Saint Paris

State
OH

Zip Code
43072

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
HIGHWAY TECHNICIAN III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209374

Amount of Each Receipt this Period

14.50

☐ Memo Item

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

B. BOLLINGER, R. ALLAN, , ,

Mailing Address P.O. Box 577

City
Saint Paris

State
OH

Zip Code
43072

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
HIGHWAY TECHNICIAN III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210009

Amount of Each Receipt this Period

14.50

☐ Memo Item

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

C. BOND, BRUCE, , ,

Mailing Address 86 Parkwood Blvd.

City
Mansfield

State
OH

Zip Code
44906

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
JUVENILE CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208744

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

59.00

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

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

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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

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

A. BOND, BRUCE, , ,

Mailing Address 86 Parkwood Blvd.

City
Mansfield

State
OH

Zip Code
44906

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
JUVENILE CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209375

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. BOND, BRUCE, , ,

Mailing Address 86 Parkwood Blvd.

City
Mansfield

State
OH

Zip Code
44906

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
JUVENILE CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210010

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. BOND, CATHERINE, J., ,

Mailing Address 48048 Sarahsville Road

City
Caldwell

State
OH

Zip Code
43724

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
LIBRARY ASSISTANT II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208745

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

85.00

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

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

A. BOND, CATHERINE, J., ,

Mailing Address 48048 Sarahsville Road

City
Caldwell

State
OH

Zip Code
43724

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
LIBRARY ASSISTANT II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209376

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. BOND, CATHERINE, J., ,

Mailing Address 48048 Sarahsville Road

City
Caldwell

State
OH

Zip Code
43724

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
LIBRARY ASSISTANT II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210011

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. BOND, DAVID, W., ,

Mailing Address 831 Dream Drive

City
Mansfield

State
OH

Zip Code
44907

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 ▼

319.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208746

Amount of Each Receipt this Period

14.50

☐ Memo Item

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

64.50

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

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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

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

A. BOND, DAVID, W., ,

Mailing Address 831 Dream Drive

City
Mansfield

State
OH

Zip Code
44907

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 ▼

333.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209377

Amount of Each Receipt this Period

14.50

☐ Memo Item

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

B. BOND, DAVID, W., ,

Mailing Address 831 Dream Drive

City
Mansfield

State
OH

Zip Code
44907

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 ▼

348.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210012

Amount of Each Receipt this Period

14.50

☐ Memo Item

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

C. BOND, TIFFANY, S., ,

Mailing Address 113 Veneto Villa

City
Springfield

State
IL

Zip Code
62703

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
HUMAN SERVICES CASEWORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208130

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

59.00

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 OF 1411

(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. **BONNER, ETHEL, L., ,**

Mailing Address 3219 Aldrich Avenue N

City
Minneapolis

State
MN

Zip Code
55412

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211636

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. **BOONE, SHAKEEM, V., ,**

Mailing Address 5204 4th Street NW

City
Washington

State
DC

Zip Code
20011

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
STAFF SPECIALIST I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

819.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206199

Amount of Each Receipt this Period

42.02

☐ Memo Item

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

C. **BOONE, SHAKEEM, V., ,**

Mailing Address 5204 4th Street NW

City
Washington

State
DC

Zip Code
20011

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
STAFF SPECIALIST I

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

861.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206554

Amount of Each Receipt this Period

42.02

☐ Memo Item

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

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

114.04

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
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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. BORA, GLORIANNE, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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 Y
10 / 25 / 2018

Transaction ID : SA11AI.207365

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

B. BORA, GLORIANNE, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207566

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

C. BORA, GLORIANNE, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207772

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

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

45.00

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

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

FOR LINE NUMBER: PAGE 118 OF 1411

(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. BORGES-HERNANDEZ, BENJAMIN, , ,

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 (for Individual)
AFSCME INT'L

Occupation (for Individual)
AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1033.40

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206200

Amount of Each Receipt this Period

49.42

☐ Memo Item

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

B. BORGES-HERNANDEZ, BENJAMIN, , ,

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 (for Individual)
AFSCME INT'L

Occupation (for Individual)
AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1082.82

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206555

Amount of Each Receipt this Period

49.42

☐ Memo Item

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

C. BORON, CHRISTOPHER, R., ,

Mailing Address 105 Ingle Place

City
Alexandria

State
VA

Zip Code
22304

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
DATABASE ANALYST I

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1328.17

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206201

Amount of Each Receipt this Period

63.72

☐ Memo Item

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

162.56

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 119 OF 1411
(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. BORON, CHRISTOPHER, R., ,

Mailing Address 105 Ingle Place

City
AlexandriaState
VAZip Code
22304FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
DATABASE ANALYST I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1391.89

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2018

Transaction ID : SA11AI.206556

Amount of Each Receipt this Period

63.72

☐ Memo Item

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

B. BORRERO, ROCHELLE, N., ,

Mailing Address P.O. Box 631876

City
Lanai CityState
HIZip Code
96763FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 646Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.211279

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. BOTELLO, ROBERTO, , ,

Mailing Address 8442 Bruce Drive

City
NilesState
ILZip Code
60714FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
MENTAL HEALTH TECH I

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

441.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

Transaction ID : SA11AI.208131

Amount of Each Receipt this Period

42.00

☐ Memo Item

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

125.72

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 120 OF 1411

(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. BOTTOMS, CLINTON, J., , III

Mailing Address 938 Woodbine Street

 City
 Pittsburgh

 State
 PA

 Zip Code
 15201

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME PA CN 13/NSP.LOCAL 297

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.206988

Amount of Each Receipt this Period

☐ Memo Item

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

B. BOVEE, JOANNE, M., ,

Mailing Address 4320 NW Second Avenue

 City
 Des Moines

 State
 IA

 Zip Code
 50313

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME IA CN 61/STATE OF IA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.211830

Amount of Each Receipt this Period

☐ Memo Item

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

C. BOVEE, JOANNE, M., ,

Mailing Address 4320 NW Second Avenue

 City
 Des Moines

 State
 IA

 Zip Code
 50313

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME IA CN 61/STATE OF IA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.211887

Amount of Each Receipt this Period

☐ Memo Item

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

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

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

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

FOR LINE NUMBER: PAGE 121 OF 1411

(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. BOWDEN, LAVERNE, D., ,

Mailing Address 1484 E 195th Street

City
Euclid

State
OH

Zip Code
44117

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 SERGEANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208747

Amount of Each Receipt this Period

10.50

☐ Memo Item

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

B. BOWDEN, LAVERNE, D., ,

Mailing Address 1484 E 195th Street

City
Euclid

State
OH

Zip Code
44117

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 SERGEANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209378

Amount of Each Receipt this Period

10.50

☐ Memo Item

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

C. BOWDEN, LAVERNE, D., ,

Mailing Address 1484 E 195th Street

City
Euclid

State
OH

Zip Code
44117

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 SERGEANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210013

Amount of Each Receipt this Period

10.50

☐ Memo Item

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

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

31.50

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

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

A. BOWDEN, VERONICA, A., ,

Mailing Address P.O. Box 494

City
 Tamms

State
 IL

Zip Code
 62988

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

HUMAN SERVICES CASEWORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.82

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 05 / 2018

Transaction ID : SA11AI.208132

Amount of Each Receipt this Period

31.26

☐ Memo Item

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

B. BOWE, RYAN, , ,

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 ▼

763.38

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 08 / 2018

Transaction ID : SA11AI.206989

Amount of Each Receipt this Period

81.66

☐ Memo Item

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

C. BOWER, MARY, L., ,

Mailing Address 14674 E Broad Street

City
 Reynoldsburg

State
 OH

Zip Code
 43068

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

FINANCIAL ASSOCIATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

242.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 26 / 2018

Transaction ID : SA11AI.208748

Amount of Each Receipt this Period

11.00

☐ Memo Item

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

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

123.92

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

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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

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

A. BOWER, MARY, L., ,

Mailing Address 14674 E Broad Street

City

Reynoldsburg

State

OH

Zip Code

43068

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

FINANCIAL ASSOCIATE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

253.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.209379

Amount of Each Receipt this Period

11.00

☐ Memo Item

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

B. BOWER, MARY, L., ,

Mailing Address 14674 E Broad Street

City

Reynoldsburg

State

OH

Zip Code

43068

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

FINANCIAL ASSOCIATE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210014

Amount of Each Receipt this Period

11.00

☐ Memo Item

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

C. BOWMAN, KATHY, J., ,

Mailing Address 1417 E Farwell Street

City

Sandusky

State

OH

Zip Code

44870

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

COOK I

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2018

Transaction ID : SA11AI.208749

Amount of Each Receipt this Period

14.50

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

36.50

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

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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

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

A. BOWMAN, KATHY, J., ,

Mailing Address 1417 E Farwell Street

City
Sandusky

State
OH

Zip Code
44870

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
COOK I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.50

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209380

Amount of Each Receipt this Period

14.50

☐ Memo Item

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

B. BOWMAN, KATHY, J., ,

Mailing Address 1417 E Farwell Street

City
Sandusky

State
OH

Zip Code
44870

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
COOK I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210015

Amount of Each Receipt this Period

14.50

☐ Memo Item

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

C. BOWSHIER, CAROL, , ,

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 (for Individual)
AFSCME INT'L/STATE STREET

Occupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

440.00

Date of Receipt

11 / 02 / 2018

Transaction ID : SA11AI.206557

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

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

69.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 125 OF 1411
(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. BOYD, ERIC, R., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 118 East Walnut Street City Westerville State OH Zip Code 43801 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME OH CN 8 Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 758.42			Date of Receipt M M / D D / Y Y Y Y Y 11 / 06 / 2018 Transaction ID : SA11AI.210868 Amount of Each Receipt this Period 69.26 ☐ Memo Item
B. BOYER, DENISE, L., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address P.O. Box 88 City Monroeton State PA Zip Code 18832 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME PA CN 13/NSP/LOCAL 3896 Occupation (for Individual) 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 Y 11 / 08 / 2018 Transaction ID : SA11AI.206990 Amount of Each Receipt this Period 20.00 ☐ Memo Item
C. BRABSON, MELVIN, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 5510 Chalmers City Detroit State MI Zip Code 48213 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME MI CN 25 Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 635.60			Date of Receipt M M / D D / Y Y Y Y Y 11 / 07 / 2018 Transaction ID : SA11AI.211332 Amount of Each Receipt this Period 30.70 ☐ Memo Item
SUBTOTAL of Receipts This Page (optional)..... ▶			119.96
TOTAL This Period (last page this line number only)..... ▶			

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary 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

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

A. BRABSON, MELVIN, , ,

Mailing Address 5510 Chalmers

City
DetroitState
MIZip Code
48213FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MI CN 25Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.30

Date of Receipt

M M	D D	Y Y Y Y
11	20	2018

Transaction ID : SA11AI.211377

Amount of Each Receipt this Period

30.70

☐ Memo Item

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

B. BRACHTER, ANDREA, , ,

Mailing Address 4301 Executive Park Drive

City
HarrisburgState
PAZip Code
17111FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

579.48

Date of Receipt

M M	D D	Y Y Y Y
11	08	2018

Transaction ID : SA11AI.206991

Amount of Each Receipt this Period

52.68

☐ Memo Item

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

C. BRACKEN, YOLANDA, D., ,

Mailing Address 5408 Ashberry Village Court

City
ColumbusState
OHZip Code
43228FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M	D D	Y Y Y Y
10	26	2018

Transaction ID : SA11AI.208750

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

108.38

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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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

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

A. BRACKEN, YOLANDA, D., ,

Mailing Address 5408 Ashberry Village Court

 City
 Columbus

 State
 OH

 Zip Code
 43228

 FEC ID number of contributing
 federal political committee.

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

 Occupation (for Individual)
 TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.209381

Amount of Each Receipt this Period

☐ Memo Item

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

B. BRACKEN, YOLANDA, D., ,

Mailing Address 5408 Ashberry Village Court

 City
 Columbus

 State
 OH

 Zip Code
 43228

 FEC ID number of contributing
 federal political committee.

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

 Occupation (for Individual)
 TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210016

Amount of Each Receipt this Period

☐ Memo Item

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

C. BRADFORD, CAMILLA, E., ,

Mailing Address 24446 Rimview Road

 City
 Moreno Valley

 State
 CA

 Zip Code
 92557

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME CA LOC 3930

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	07	/	2018

Transaction ID : SA11AI.211142

Amount of Each Receipt this Period

☐ Memo Item

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

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

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

Use separate schedule(s)
for each category of the
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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

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

A. BRADY, SHARON, L., ,

Mailing Address 827 Cutlip Drive

City
Columbus

State
OH

Zip Code
43085

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210017

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

B. BRADY, TERRI, E., ,

Mailing Address 13606 Colgate Way
#0545

City
Silver Spring

State
MD

Zip Code
20904

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
COMMUNICATIONS COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.50

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206202

Amount of Each Receipt this Period

12.50

☐ Memo Item

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

C. BRADY, TERRI, E., ,

Mailing Address 13606 Colgate Way
#0545

City
Silver Spring

State
MD

Zip Code
20904

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
COMMUNICATIONS COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206558

Amount of Each Receipt this Period

12.50

☐ Memo Item

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

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

45.00

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

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

A. BRADY, TIMOTHY, A., ,

Mailing Address 2912 Possum Run Road

City
Mansfield

State
OH

Zip Code
44903

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
ELECTRICIAN II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209382

Amount of Each Receipt this Period

9.00

☐ Memo Item

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

B. BRADY, TIMOTHY, A., ,

Mailing Address 2912 Possum Run Road

City
Mansfield

State
OH

Zip Code
44903

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
ELECTRICIAN II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210018

Amount of Each Receipt this Period

9.00

☐ Memo Item

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

C. BRAGLIN, RYAN, L., ,

Mailing Address 6800 N High Street

City
Worthington

State
OH

Zip Code
43085-2512

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

616.85

Date of Receipt

11 / 06 / 2018

Transaction ID : SA11AI.210869

Amount of Each Receipt this Period

56.98

☐ Memo Item

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

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

74.98

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
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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. BRAIDIGAN, NORMA, , ,

Mailing Address 300 N Derr Drive

 City
 Lewisburg

 State
 PA

 Zip Code
 17837-1387

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME INT'L/STATE STREET

 Occupation (for Individual)
 RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.206559

Amount of Each Receipt this Period

☐ Memo Item

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

B. BRANDT, MARY, L., ,

Mailing Address 738 Square Street

 City
 Mount Joy

 State
 PA

 Zip Code
 17552

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME PA CN 13/PASSHE

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.206992

Amount of Each Receipt this Period

☐ Memo Item

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

C. BRANSON, MARILYN, , ,

 Mailing Address 6609 Blakemore Street
 Apt. A

 City
 Philadelphia

 State
 PA

 Zip Code
 19119

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME PA CN 13/STATE OF PA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.206993

Amount of Each Receipt this Period

☐ Memo Item

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

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

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

Use separate schedule(s)
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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

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

A. **BRANSTOOL, LISA, J., ,**

Mailing Address 944 McCarrick Court

City

Reynoldsburg

State

OH

Zip Code

43068

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

UTILITY SPECIALIST III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208752

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. **BRANSTOOL, LISA, J., ,**

Mailing Address 944 McCarrick Court

City

Reynoldsburg

State

OH

Zip Code

43068

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

UTILITY SPECIALIST III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209383

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. **BRANSTOOL, LISA, J., ,**

Mailing Address 944 McCarrick Court

City

Reynoldsburg

State

OH

Zip Code

43068

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

UTILITY SPECIALIST III

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210019

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

30.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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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

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

A. BRAYMAN, NIKKI, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
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
1	0		2	5		2	0	1	8

Transaction ID : SA11AI.207366

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

B. BRAYMAN, NIKKI, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
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
1	1		0	9		2	0	1	8

Transaction ID : SA11AI.207567

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

C. BRAYMAN, NIKKI, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	6		2	0	1	8

Transaction ID : SA11AI.207773

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

45.00

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

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

A. BRAYSHAW, JOHN, P., ,

Mailing Address 259 Washington Avenue

City
London

State
OH

Zip Code
43140

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 ▼

319.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208753

Amount of Each Receipt this Period

14.50

☐ Memo Item

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

B. BRAYSHAW, JOHN, P., ,

Mailing Address 259 Washington Avenue

City
London

State
OH

Zip Code
43140

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 ▼

333.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209384

Amount of Each Receipt this Period

14.50

☐ Memo Item

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

C. BRAYSHAW, JOHN, P., ,

Mailing Address 259 Washington Avenue

City
London

State
OH

Zip Code
43140

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 ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210020

Amount of Each Receipt this Period

14.50

☐ Memo Item

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

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

43.50

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

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

A. **BRENNER, WILLIAM, , ,**

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 (for Individual)

AFSCME PA CN 13

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1222.45

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.206994

Amount of Each Receipt this Period

106.30

☐ Memo Item

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

B. **BRIGGS-BIBB, VIVIAN, , ,**

Mailing Address P.O. Box 94214

City
Cleveland

State
OH

Zip Code
44101

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
PROJECT INSPECTOR II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208754

Amount of Each Receipt this Period

13.00

☐ Memo Item

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

C. **BRIGGS-BIBB, VIVIAN, , ,**

Mailing Address P.O. Box 94214

City
Cleveland

State
OH

Zip Code
44101

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
PROJECT INSPECTOR II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209385

Amount of Each Receipt this Period

13.00

☐ Memo Item

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

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

132.30

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

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

FOR LINE NUMBER: PAGE 135 OF 1411

(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. BRIGGS-BIBB, VIVIAN, , ,

Mailing Address P.O. Box 94214

City
Cleveland

State
OH

Zip Code
44101

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
PROJECT INSPECTOR II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210021

Amount of Each Receipt this Period

13.00

☐ Memo Item

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

B. BRIMLEY, MARY, , ,

Mailing Address 8033 Excelsior Drive
Suite C

City
Madison

State
WI

Zip Code
53717

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WI CN 32/MBR

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.46

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.211432

Amount of Each Receipt this Period

24.86

☐ Memo Item

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

C. BRIMM, JOHNNY, A., ,

Mailing Address 502 South Street

City
Anna

State
IL

Zip Code
62906

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
MENTAL HEALTH TECH I

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208133

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

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

67.86

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

FOR LINE NUMBER: PAGE 136 OF 1411

(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. BRINLEY, KIERA, A., ,

Mailing Address 206 N Pierce Street

City

Crestline

State

OH

Zip Code

44827

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
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

242.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.208755

Amount of Each Receipt this Period

11.00

☐ Memo Item

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

B. BRINLEY, KIERA, A., ,

Mailing Address 206 N Pierce Street

City

Crestline

State

OH

Zip Code

44827

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
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

253.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209386

Amount of Each Receipt this Period

11.00

☐ Memo Item

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

C. BRINLEY, KIERA, A., ,

Mailing Address 206 N Pierce Street

City

Crestline

State

OH

Zip Code

44827

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
☐ Other (specify)

General

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210022

Amount of Each Receipt this Period

11.00

☐ Memo Item

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

33.00

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 137 OF 1411

(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. BRISSETT, JILL, E., ,

Mailing Address 1045 6th Street NW

 City
 Faribault

 State
 MN

 Zip Code
 55021

 FEC ID number of contributing
 federal political committee.

 C

 Name of Employer (for Individual)
 AFSCME MN CN 5/STATE OF MN

 Occupation (for Individual)
 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
 11 / 01 / 2018

Transaction ID : SA11AI.211637

Amount of Each Receipt this Period

 20.00
☐ Memo Item

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

B. BRITAIN, SCOTT, , ,

Mailing Address 1212 Jefferson Street SE

 City
 Olympia

 State
 WA

 Zip Code
 98501

 FEC ID number of contributing
 federal political committee.

 C

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 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
 11 / 09 / 2018

Transaction ID : SA11AI.207568

Amount of Each Receipt this Period

 10.00
☐ Memo Item

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

C. BRITAIN, SCOTT, , ,

Mailing Address 1212 Jefferson Street SE

 City
 Olympia

 State
 WA

 Zip Code
 98501

 FEC ID number of contributing
 federal political committee.

 C

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 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
 11 / 26 / 2018

Transaction ID : SA11AI.207774

Amount of Each Receipt this Period

 10.00
☐ Memo Item

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

 40.00
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 138 OF 1411

(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. BROCKMILLER, BILL, , ,

Mailing Address 1418 10th Street
 #204

City
 Lacrosse

State
 WI

Zip Code
 54601

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 AFSCME WI CN 32/STATE OF WI

Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.64

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2018

Transaction ID : SA11AI.211433

Amount of Each Receipt this Period

19.72

☐ Memo Item

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

B. BROWN, ANDREA, M., ,

Mailing Address 6800 N High Street

City
 Worthington

State
 OH

Zip Code
 43085

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 AFSCME OH CN 8/METROHEALTH

Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 23 / 2018

Transaction ID : SA11AI.210786

Amount of Each Receipt this Period

19.24

☐ Memo Item

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

C. BROWN, ANDREA, M., ,

Mailing Address 6800 N High Street

City
 Worthington

State
 OH

Zip Code
 43085

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 AFSCME OH CN 8/METROHEALTH

Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

221.26

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 06 / 2018

Transaction ID : SA11AI.210870

Amount of Each Receipt this Period

9.62

☐ Memo Item

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

48.58

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

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

FOR LINE NUMBER: PAGE 139 OF 1411

(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. BROWN, BETSY, L., ,

Mailing Address 2314 Ravenna Road

City

Ravenna

State

OH

Zip Code

44266

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 ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	6		2	0	1	8

Transaction ID : SA11AI.208756

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. BROWN, BETSY, L., ,

Mailing Address 2314 Ravenna Road

City

Ravenna

State

OH

Zip Code

44266

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 ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	9		2	0	1	8

Transaction ID : SA11AI.209387

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. BROWN, BETSY, L., ,

Mailing Address 2314 Ravenna Road

City

Ravenna

State

OH

Zip Code

44266

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 ▼

240.00

Date of Receipt

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

Transaction ID : SA11AI.210023

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

30.00

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 140 OF 1411

(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. BROWN, DOROTHY, E., ,

Mailing Address P.O. Box 136

City
Malvern

State
OH

Zip Code
44644

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 ▼

308.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208757

Amount of Each Receipt this Period

14.00

☐ Memo Item

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

B. BROWN, DOROTHY, E., ,

Mailing Address P.O. Box 136

City
Malvern

State
OH

Zip Code
44644

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 ▼

322.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209388

Amount of Each Receipt this Period

14.00

☐ Memo Item

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

C. BROWN, DOROTHY, E., ,

Mailing Address P.O. Box 136

City
Malvern

State
OH

Zip Code
44644

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 ▼

336.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210024

Amount of Each Receipt this Period

14.00

☐ Memo Item

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

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

42.00

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

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

FOR LINE NUMBER: PAGE 141 OF 1411

(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. BROWN, ERIC, W., , SR.

Mailing Address 5775 Lincoln Highway

City
Gap

State
PA

Zip Code
17527

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)
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
10 / 31 / 2018

Transaction ID : SA11AI.206995

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

B. BROWN, HARRY, , , III

Mailing Address 8033 Excelsior Drive
Suite C

City
Madison

State
WI

Zip Code
53717

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WI CN 32/MBR

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.64

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2018

Transaction ID : SA11AI.211434

Amount of Each Receipt this Period

25.72

☐ Memo Item

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

C. BROWN, JEANETTE, M., ,

Mailing Address 6 Reese Avenue
P.O. Box 46

City
Colver

State
PA

Zip Code
15927

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)
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
10 / 31 / 2018

Transaction ID : SA11AI.206996

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

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

65.72

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

FOR LINE NUMBER: PAGE 142 OF 1411

(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. BROWN, JERRY, L., ,

Mailing Address 228 Minty Drive

City
DaytonState
OHZip Code
45415FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

583.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.208758

Amount of Each Receipt this Period

26.50

☐ Memo Item

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

B. BROWN, JERRY, L., ,

Mailing Address 228 Minty Drive

City
DaytonState
OHZip Code
45415FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

609.50

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209389

Amount of Each Receipt this Period

26.50

☐ Memo Item

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

C. BROWN, JERRY, L., ,

Mailing Address 228 Minty Drive

City
DaytonState
OHZip Code
45415FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

636.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210025

Amount of Each Receipt this Period

26.50

☐ Memo Item

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

79.50

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

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

FOR LINE NUMBER: PAGE 143 OF 1411

(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. BROWN, KEVIN, N., ,Mailing Address 1732 N Kingsley Drive
Apt. 2City
Los AngelesState
CAZip Code
90027FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

REGIONAL COMMUNICATIONS COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

911.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206203

Amount of Each Receipt this Period

42.00

☐ Memo Item

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

B. BROWN, KEVIN, N., ,Mailing Address 1732 N Kingsley Drive
Apt. 2City
Los AngelesState
CAZip Code
90027FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

REGIONAL COMMUNICATIONS COC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

953.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	15	2018

Transaction ID : SA11AI.206560

Amount of Each Receipt this Period

42.00

☐ Memo Item

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

C. BROWN, LAWSON, B., ,

Mailing Address 2017 Flag Avenue N

City
MinneapolisState
MNZip Code
55427FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	01	2018

Transaction ID : SA11AI.211638

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

114.00

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 144 OF 1411

(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. BROWN, PAMELA, D., ,

Mailing Address 1501 E. 108th Street

City
Cleveland

State
OH

Zip Code
44106

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/CUYAHOGA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

604.48

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210871

Amount of Each Receipt this Period

9.50

☐ Memo Item

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

B. BROWN, ROBERT, F., ,

Mailing Address 1708 40th Street SE

City
Washington

State
DC

Zip Code
20020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
GRAPHICS & PRINTING COORDINAT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.12

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206204

Amount of Each Receipt this Period

14.59

☐ Memo Item

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

C. BROWN, ROBERT, F., ,

Mailing Address 1708 40th Street SE

City
Washington

State
DC

Zip Code
20020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
GRAPHICS & PRINTING COORDINAT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

349.71

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206561

Amount of Each Receipt this Period

14.59

☐ Memo Item

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

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

38.68

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

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

FOR LINE NUMBER: PAGE 145 OF 1411

(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. BROWN, STEVIE, , ,

Mailing Address 8070 Buckthorne Run

City
King George

State
VA

Zip Code
22485

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

SYSTEMS SUPPORT ANALYST II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1064.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206205

Amount of Each Receipt this Period

49.02

☐ Memo Item

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

B. BROWN, STEVIE, , ,

Mailing Address 8070 Buckthorne Run

City
King George

State
VA

Zip Code
22485

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

SYSTEMS SUPPORT ANALYST II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1113.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206562

Amount of Each Receipt this Period

49.02

☐ Memo Item

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

C. BROWN, TARA, L., ,

Mailing Address 869 Burns Street

City
Mansfield

State
OH

Zip Code
44903

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 ▼

231.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208759

Amount of Each Receipt this Period

10.50

☐ Memo Item

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

108.54

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

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

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

FOR LINE NUMBER: PAGE 146 OF 1411

(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. BROWN, TARA, L., ,

Mailing Address 869 Burns Street

City
Mansfield

State
OH

Zip Code
44903

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 ▼

241.50

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209390

Amount of Each Receipt this Period

10.50

☐ Memo Item

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

B. BROWN, TARA, L., ,

Mailing Address 869 Burns Street

City
Mansfield

State
OH

Zip Code
44903

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 ▼

252.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210026

Amount of Each Receipt this Period

10.50

☐ Memo Item

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

C. BROWN, THOMAS, N., ,

Mailing Address 1320 N. 37th

City
East St. Louis

State
IL

Zip Code
62204

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
CORRECTIONAL OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

11 / 05 / 2018

Transaction ID : SA11AI.208134

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

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

61.00

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

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

FOR LINE NUMBER: PAGE 147 OF 1411

(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. BROWN, TIFFANY, N., ,

Mailing Address 208 Williford Road

City
Jonesboro

State
IL

Zip Code
62952

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
HUMAN SERVICES CASEWORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.82

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208135

Amount of Each Receipt this Period

31.26

☐ Memo Item

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

B. BROWN, WANDA, , ,

Mailing Address 17311 NW 46th Avenue

City
Carol City

State
FL

Zip Code
33055

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
LEAD ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

858.26

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206206

Amount of Each Receipt this Period

43.99

☐ Memo Item

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

C. BROWN, WANDA, , ,

Mailing Address 17311 NW 46th Avenue

City
Carol City

State
FL

Zip Code
33055

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
LEAD ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

902.25

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206563

Amount of Each Receipt this Period

43.99

☐ Memo Item

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

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

119.24

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

FOR LINE NUMBER: PAGE 148 OF 1411

(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. BROWN, WANDA, L., ,

Mailing Address 6454 Old Ben Lane

City

Canal Winchester

State

OH

Zip Code

43110

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

INFRASTRUCTURE SPECIALIST

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210027

Amount of Each Receipt this Period

8.50

☐ Memo Item

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

B. BRUCKHOFF, BRIAN, H., ,

Mailing Address P.O. Box 182

211 Ehrich Street

City

Minnesota Lake

State

MN

Zip Code

56068

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

238.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2018

Transaction ID : SA11AI.211639

Amount of Each Receipt this Period

28.00

☐ Memo Item

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

C. BRUMAGIN, ROSS, , ,

Mailing Address 22436 Little Cooley Road

City

Union City

State

PA

Zip Code

16438

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME PA CN 13/PASSHE

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2018

Transaction ID : SA11AI.206997

Amount of Each Receipt this Period

40.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

76.50

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

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

FEC Schedule A (Form 3X) Rev. 06/2016

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

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

FOR LINE NUMBER: PAGE 150 OF 1411

(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. BUCHANAN, CHRISTOPHER, R., ,

Mailing Address 2020 South Lowell Street

City
Springfield

State
IL

Zip Code
62704

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

DISABILITY CLAIMS ADJUDICATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 05 / 2018

Transaction ID : SA11AI.208136

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. BUCHANAN, JEROME, , ,

Mailing Address 10833 West 'O' Avenue

City
Mattawan

State
MI

Zip Code
49071

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MI CN 25

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

11 / 07 / 2018

Transaction ID : SA11AI.211333

Amount of Each Receipt this Period

12.00

☐ Memo Item

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

C. BUCHANAN, JEROME, , ,

Mailing Address 10833 West 'O' Avenue

City
Mattawan

State
MI

Zip Code
49071

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MI CN 25

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

264.00

Date of Receipt

11 / 20 / 2018

Transaction ID : SA11AI.211378

Amount of Each Receipt this Period

12.00

☐ Memo Item

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

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

54.00

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 1411

(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. BUCKLEY, THOMAS, F., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 3649 Southlawn Drive <table style="width: 100%;"> <tr> <td style="width: 33%;">City Toledo</td> <td style="width: 15%;">State OH</td> <td style="width: 52%;">Zip Code 43614</td> </tr> </table> FEC ID number of contributing federal political committee. C <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH</td> <td style="width: 67%;">Occupation (for Individual) EXTERNAL AUDITOR III</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 385.00			City Toledo	State OH	Zip Code 43614	Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) EXTERNAL AUDITOR III	Date of Receipt M M / D D / Y Y Y Y Y 10 / 26 / 2018 Transaction ID : SA11AI.208762 Amount of Each Receipt this Period 17.50 ☐ Memo Item
City Toledo	State OH	Zip Code 43614						
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) EXTERNAL AUDITOR III							
B. BUCKLEY, THOMAS, F., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 3649 Southlawn Drive <table style="width: 100%;"> <tr> <td style="width: 33%;">City Toledo</td> <td style="width: 15%;">State OH</td> <td style="width: 52%;">Zip Code 43614</td> </tr> </table> FEC ID number of contributing federal political committee. C <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH</td> <td style="width: 67%;">Occupation (for Individual) EXTERNAL AUDITOR III</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 402.50			City Toledo	State OH	Zip Code 43614	Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) EXTERNAL AUDITOR III	Date of Receipt M M / D D / Y Y Y Y Y 11 / 09 / 2018 Transaction ID : SA11AI.209393 Amount of Each Receipt this Period 17.50 ☐ Memo Item
City Toledo	State OH	Zip Code 43614						
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) EXTERNAL AUDITOR III							
C. BUCKLEY, THOMAS, F., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 3649 Southlawn Drive <table style="width: 100%;"> <tr> <td style="width: 33%;">City Toledo</td> <td style="width: 15%;">State OH</td> <td style="width: 52%;">Zip Code 43614</td> </tr> </table> FEC ID number of contributing federal political committee. C <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH</td> <td style="width: 67%;">Occupation (for Individual) EXTERNAL AUDITOR III</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) Aggregate Year-to-Date ▼ 420.00			City Toledo	State OH	Zip Code 43614	Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) EXTERNAL AUDITOR III	Date of Receipt M M / D D / Y Y Y Y Y 11 / 23 / 2018 Transaction ID : SA11AI.210029 Amount of Each Receipt this Period 17.50 ☐ Memo Item
City Toledo	State OH	Zip Code 43614						
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) EXTERNAL AUDITOR III							
SUBTOTAL of Receipts This Page (optional)..... ▶			 52.50					
TOTAL This Period (last page this line number only)..... ▶			 					

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

FOR LINE NUMBER: PAGE 152 OF 1411

(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. BUNDY, CARTER, A., ,

Mailing Address 1968 Otowi Drive

City
Santa FeState
NMZip Code
87505FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
POLITICAL ACTION REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2109.40

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206208

Amount of Each Receipt this Period

106.10

☐ Memo Item

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

B. BUNDY, CARTER, A., ,

Mailing Address 1968 Otowi Drive

City
Santa FeState
NMZip Code
87505FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
POLITICAL ACTION REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2215.50

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	15	2018

Transaction ID : SA11AI.206565

Amount of Each Receipt this Period

106.10

☐ Memo Item

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

C. BUNDY, DONALD, , ,

Mailing Address 5780 Arabian Drive

City
Alta LomaState
CAZip Code
91701FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 1902Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	19	2018

Transaction ID : SA11AI.211058

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

222.20

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

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

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

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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

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

A. BUNDY, DONALD, , ,

Mailing Address 5780 Arabian Drive

City
Alta Loma

State
CA

Zip Code
91701

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 1902

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211079

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. BUNDY, DONALD, , ,

Mailing Address 5780 Arabian Drive

City
Alta Loma

State
CA

Zip Code
91701

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 1902

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 20 / 2018

Transaction ID : SA11AI.211100

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. BUNNELL, SHANE, R., ,

Mailing Address 906 west Street

City
Mantorville

State
MN

Zip Code
55955

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
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
11 / 01 / 2018

Transaction ID : SA11AI.211640

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

40.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 154 OF 1411
(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. BURCHETT, LARRY, B., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 21818 Warman Road <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">City Lynchburg</td> <td style="width: 16%;">State OH</td> <td style="width: 51%;">Zip Code 45142</td> </tr> </table> FEC ID number of contributing federal political committee. C			City Lynchburg	State OH	Zip Code 45142	Date of Receipt <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">M M M 10</td> <td style="width: 33%;">D D D 26</td> <td style="width: 33%;">Y Y Y Y Y 2018</td> </tr> </table> Transaction ID : SA11AI.208763 Amount of Each Receipt this Period 10.00 ☐ Memo Item	M M M 10	D D D 26	Y Y Y Y Y 2018
City Lynchburg	State OH	Zip Code 45142							
M M M 10	D D D 26	Y Y Y Y Y 2018							
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 ▼ 220.00						
B. BURCHETT, LARRY, B., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 21818 Warman Road <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">City Lynchburg</td> <td style="width: 16%;">State OH</td> <td style="width: 51%;">Zip Code 45142</td> </tr> </table> FEC ID number of contributing federal political committee. C			City Lynchburg	State OH	Zip Code 45142	Date of Receipt <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">M M M 11</td> <td style="width: 33%;">D D D 09</td> <td style="width: 33%;">Y Y Y Y Y 2018</td> </tr> </table> Transaction ID : SA11AI.209394 Amount of Each Receipt this Period 10.00 ☐ Memo Item	M M M 11	D D D 09	Y Y Y Y Y 2018
City Lynchburg	State OH	Zip Code 45142							
M M M 11	D D D 09	Y Y Y Y Y 2018							
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 ▼ 230.00						
C. BURCHETT, LARRY, B., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 21818 Warman Road <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">City Lynchburg</td> <td style="width: 16%;">State OH</td> <td style="width: 51%;">Zip Code 45142</td> </tr> </table> FEC ID number of contributing federal political committee. C			City Lynchburg	State OH	Zip Code 45142	Date of Receipt <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">M M M 11</td> <td style="width: 33%;">D D D 23</td> <td style="width: 33%;">Y Y Y Y Y 2018</td> </tr> </table> Transaction ID : SA11AI.210030 Amount of Each Receipt this Period 10.00 ☐ Memo Item	M M M 11	D D D 23	Y Y Y Y Y 2018
City Lynchburg	State OH	Zip Code 45142							
M M M 11	D D D 23	Y Y Y Y Y 2018							
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 ▼ 240.00						
SUBTOTAL of Receipts This Page (optional)..... ▶			30.00						
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 155 OF 1411

(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. BURGESS, ROBERT, J., ,

Mailing Address 306 W Meek Street

 City
 Abingdon

 State
 IL

 Zip Code
 61410

 FEC ID number of contributing
 federal political committee.

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

 Occupation (for Individual)
 CORRECTIONAL OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.208138

Amount of Each Receipt this Period

☐ Memo Item

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

B. BURKE, MICHELLE, A., ,

Mailing Address 4031 Executive Park Drive

 City
 Harrisburg

 State
 PA

 Zip Code
 17111

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME PA CN 13./LOCAL 972

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.207200

Amount of Each Receipt this Period

☐ Memo Item

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

C. BURKE, MICHELLE, A., ,

Mailing Address 4031 Executive Park Drive

 City
 Harrisburg

 State
 PA

 Zip Code
 17111

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME PA CN 13./LOCAL 972

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.207201

Amount of Each Receipt this Period

☐ Memo Item

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

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

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

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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

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

A. BURKE, SHERRI-ANN, , ,

Mailing Address PMB 1404 120 State Avenue

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28Occupation (for Individual)
LABOR ADVOCATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

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

Transaction ID : SA11AI.207775

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BURKE-HOWELL, LINDSEY, R., ,

Mailing Address 1024 W. 3rd Street S.

City
NewtonState
IAZip Code
50208FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/STATE OF IAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	8			2	0	1	8		

Transaction ID : SA11AI.211831

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BURKE-HOWELL, LINDSEY, R., ,

Mailing Address 1024 W. 3rd Street S.

City
NewtonState
IAZip Code
50208FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/STATE OF IAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	0	2		2	0	1	8		

Transaction ID : SA11AI.211888

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

41.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BURKEPILE, RUSSELL, A., ,

Mailing Address 408 N. Market Street

City

Loudonville

State

OH

Zip Code

44842

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	06	2018

Transaction ID : SA11AI.210031

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BURKHEAD, MARY, , ,

Mailing Address 6800 N High Street

City

Worthington

State

OH

Zip Code

43085-2512

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH CN 8/CUYAHOGA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

396.24

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	06	2018

Transaction ID : SA11AI.210872

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BURKS, SIERRAH, B., ,

Mailing Address 4344 Lyman Avenue

City

Toledo

State

OH

Zip Code

43612

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

THERAPUTIC PROGRAM TECHNICIAI

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209395

Amount of Each Receipt this Period

9.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

49.00

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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☒ 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. BURKS, SIERRAH, B., ,

Mailing Address 4344 Lyman Avenue

City
Toledo

State
OH

Zip Code
43612

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210032

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BURNETT, DOUGLAS, R., ,

Mailing Address 3473 14th Street NW

City
Washington

State
DC

Zip Code
20010

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ASSISTANT DIRECTOR, POLITICAL A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1823.48

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206210

Amount of Each Receipt this Period

91.55

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BURNETT, DOUGLAS, R., ,

Mailing Address 3473 14th Street NW

City
Washington

State
DC

Zip Code
20010

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ASSISTANT DIRECTOR, POLITICAL A

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1915.03

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206567

Amount of Each Receipt this Period

91.55

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

192.10

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 159 OF 1411

(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. BURNETTE, DEBRA, D., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 223 Ironclad Drive City Columbus State OH Zip Code 43213 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 ▼ 204.00			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 23 / 2018 Transaction ID : SA11AI.210033 Amount of Each Receipt this Period 8.50 ☐ Memo Item
B. BURNS, MICHAEL, P., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 296 Churchmans Road City New Castle State DE Zip Code 19720 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME DE CN 81 Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 402.22			Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 19 / 2018 Transaction ID : SA11AI.211261 Amount of Each Receipt this Period 42.40 ☐ Memo Item
C. BURNS, MICHAEL, P., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 296 Churchmans Road City New Castle State DE Zip Code 19720 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME DE CN 81 Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 444.62			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 14 / 2018 Transaction ID : SA11AI.211268 Amount of Each Receipt this Period 42.40 ☐ Memo Item
SUBTOTAL of Receipts This Page (optional)..... ▶			93.30
TOTAL This Period (last page this line number only)..... ▶			

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BURROWS, JEAN, A., ,

Mailing Address 1818 Myers Road

City
ShelbyState
OHZip Code
44875FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
HIGHWAY TECHNICIAN II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.208766

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BURROWS, JEAN, A., ,

Mailing Address 1818 Myers Road

City
ShelbyState
OHZip Code
44875FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
HIGHWAY TECHNICIAN II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209397

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BURROWS, JEAN, A., ,

Mailing Address 1818 Myers Road

City
ShelbyState
OHZip Code
44875FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
HIGHWAY TECHNICIAN II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210034

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

30.00

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BURTIN, JOHNNY, , ,

Mailing Address 19120 Meredith Avenue

City
Euclid

State
OH

Zip Code
44119

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 SERGEANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208767

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BURTIN, JOHNNY, , ,

Mailing Address 19120 Meredith Avenue

City
Euclid

State
OH

Zip Code
44119

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 SERGEANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209398

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BURTIN, JOHNNY, , ,

Mailing Address 19120 Meredith Avenue

City
Euclid

State
OH

Zip Code
44119

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 SERGEANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210035

Amount of Each Receipt this Period

14.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

42.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BUSSEY, SHAWN, A., ,

Mailing Address 6456 Marietta Road

City
ChillicotheState
OHZip Code
45601FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2018			

Transaction ID : SA11AI.208768

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BUSSEY, SHAWN, A., ,

Mailing Address 6456 Marietta Road

City
ChillicotheState
OHZip Code
45601FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			09			2018			

Transaction ID : SA11AI.209399

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BUSSEY, SHAWN, A., ,

Mailing Address 6456 Marietta Road

City
ChillicotheState
OHZip Code
45601FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			23			2018			

Transaction ID : SA11AI.210036

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

30.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 163 OF 1411

(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. BUTCHER, KATHY, R., ,

Mailing Address 4535 Valleydale Way

City
ColumbusState
OHZip Code
43231FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
OFFICE ASSISTANT III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.84

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.208769

Amount of Each Receipt this Period

11.72

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BUTCHER, KATHY, R., ,

Mailing Address 4535 Valleydale Way

City
ColumbusState
OHZip Code
43231FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
OFFICE ASSISTANT III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.56

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209400

Amount of Each Receipt this Period

11.72

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BUTCHER, KATHY, R., ,

Mailing Address 4535 Valleydale Way

City
ColumbusState
OHZip Code
43231FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
OFFICE ASSISTANT III

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

281.28

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210037

Amount of Each Receipt this Period

11.72

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

35.16

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 164 OF 1411

(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. BUTLER, CHARLES, L., ,

Mailing Address 15410 Wheeler Road

City
Lagrange

State
OH

Zip Code
44050

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 SERGEANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208770

Amount of Each Receipt this Period

11.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BUTLER, CHARLES, L., ,

Mailing Address 15410 Wheeler Road

City
Lagrange

State
OH

Zip Code
44050

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 SERGEANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209401

Amount of Each Receipt this Period

11.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BUTLER, CHARLES, L., ,

Mailing Address 15410 Wheeler Road

City
Lagrange

State
OH

Zip Code
44050

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 SERGEANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

276.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210038

Amount of Each Receipt this Period

11.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

34.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 165 OF 1411

(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. BUTLER, MATT, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name 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 (for Individual) AFSCME IA CN 61 Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 18 / 2018 Transaction ID : SA11AI.211866 Amount of Each Receipt this Period 30.00 ☐ Memo Item
B. BUTLER, MATT, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name 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 (for Individual) AFSCME IA CN 61 Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 330.00			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2018 Transaction ID : SA11AI.211889 Amount of Each Receipt this Period 30.00 ☐ Memo Item
C. BUTLER, NICOLE, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 3011 29th Avenue NW City Olympia State WA Zip Code 98502 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 460.00			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 25 / 2018 Transaction ID : SA11AI.207368 Amount of Each Receipt this Period 23.00 ☐ Memo Item
SUBTOTAL of Receipts This Page (optional)..... ▶			83.00
TOTAL This Period (last page this line number only)..... ▶			

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 166 OF 1411
(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. BUTLER, NICOLE, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 3011 29th Avenue NW <table border="1"> <tr> <td>City Olympia</td> <td>State WA</td> <td>Zip Code 98502</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1"> <tr> <td>Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA</td> <td>Occupation (for Individual) STAFF REPRESENTATIVE</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>483.00</td> </tr> </table>			City Olympia	State WA	Zip Code 98502	Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA	Occupation (for Individual) STAFF REPRESENTATIVE	483.00	Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td>09</td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.207569 Amount of Each Receipt this Period <table border="1"> <tr> <td>23.00</td> </tr> </table> ☐ Memo Item	M M M	D D D	Y Y Y Y Y Y	11	09	2018	23.00
City Olympia	State WA	Zip Code 98502														
Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA	Occupation (for Individual) STAFF REPRESENTATIVE															
483.00																
M M M	D D D	Y Y Y Y Y Y														
11	09	2018														
23.00																
B. BUTLER, NICOLE, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 3011 29th Avenue NW <table border="1"> <tr> <td>City Olympia</td> <td>State WA</td> <td>Zip Code 98502</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1"> <tr> <td>Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA</td> <td>Occupation (for Individual) STAFF REPRESENTATIVE</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>506.00</td> </tr> </table>			City Olympia	State WA	Zip Code 98502	Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA	Occupation (for Individual) STAFF REPRESENTATIVE	506.00	Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td>26</td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.207776 Amount of Each Receipt this Period <table border="1"> <tr> <td>23.00</td> </tr> </table> ☐ Memo Item	M M M	D D D	Y Y Y Y Y Y	11	26	2018	23.00
City Olympia	State WA	Zip Code 98502														
Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA	Occupation (for Individual) STAFF REPRESENTATIVE															
506.00																
M M M	D D D	Y Y Y Y Y Y														
11	26	2018														
23.00																
C. BUTLER, RODGER, A., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 3819 Cleveland Road <table border="1"> <tr> <td>City Sandusky</td> <td>State OH</td> <td>Zip Code 44870</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1"> <tr> <td>Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH</td> <td>Occupation (for Individual) MAINTENANCE REPAIR TECHNICIAN</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>207.00</td> </tr> </table>			City Sandusky	State OH	Zip Code 44870	Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) MAINTENANCE REPAIR TECHNICIAN	207.00	Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td>09</td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.209402 Amount of Each Receipt this Period <table border="1"> <tr> <td>9.00</td> </tr> </table> ☐ Memo Item	M M M	D D D	Y Y Y Y Y Y	11	09	2018	9.00
City Sandusky	State OH	Zip Code 44870														
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) MAINTENANCE REPAIR TECHNICIAN															
207.00																
M M M	D D D	Y Y Y Y Y Y														
11	09	2018														
9.00																
SUBTOTAL of Receipts This Page (optional)..... ▶			<table border="1"> <tr> <td>55.00</td> </tr> </table>	55.00												
55.00																
TOTAL This Period (last page this line number only)..... ▶			<table border="1"> <tr> <td></td> </tr> </table>													

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 167 OF 1411

(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. BUTLER, RODGER, A., ,

Mailing Address 3819 Cleveland Road

City
SanduskyState
OHZip Code
44870FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
MAINTENANCE REPAIR TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M	D D	Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210039

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BUTTERFIELD, LORI, L., ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
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
10	25	2018

Transaction ID : SA11AI.207369

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BUTTERFIELD, LORI, L., ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
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
11	09	2018

Transaction ID : SA11AI.207570

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

39.00

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 168 OF 1411

(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. BUTTERFIELD, LORI, L., ,

Mailing Address 1212 Jefferson Street SE

 City
 Olympia

 State
 WA

 Zip Code
 98501

FEC ID number of contributing federal political committee.

C

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	6			2	0	1	8		

Transaction ID : SA11AI.207777

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BUTTERS, CHRISTA, , ,

Mailing Address 1212 Jefferson Street SE

 City
 Olympia

 State
 WA

 Zip Code
 98501

FEC ID number of contributing federal political committee.

C

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	9			2	0	1	8		

Transaction ID : SA11AI.207571

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BUTTERS, CHRISTA, , ,

Mailing Address 1212 Jefferson Street SE

 City
 Olympia

 State
 WA

 Zip Code
 98501

FEC ID number of contributing federal political committee.

C

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	6			2	0	1	8		

Transaction ID : SA11AI.207778

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

35.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 169 OF 1411

(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. BUTZ, SUSAN, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 1212 Jefferson Street SE <table border="1"> <tr> <td>City Olympia</td> <td>State WA</td> <td>Zip Code 98501</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1"> <tr> <td>Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA</td> <td>Occupation (for Individual) STAFF REPRESENTATIVE</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>210.00</td> </tr> </table>			City Olympia	State WA	Zip Code 98501	Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA	Occupation (for Individual) STAFF REPRESENTATIVE	210.00	Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td>09</td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.207572 Amount of Each Receipt this Period <table border="1"> <tr> <td>10.00</td> </tr> </table> ☐ Memo Item	M M M	D D D	Y Y Y Y Y Y	11	09	2018	10.00
City Olympia	State WA	Zip Code 98501														
Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA	Occupation (for Individual) STAFF REPRESENTATIVE															
210.00																
M M M	D D D	Y Y Y Y Y Y														
11	09	2018														
10.00																
B. BUTZ, SUSAN, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 1212 Jefferson Street SE <table border="1"> <tr> <td>City Olympia</td> <td>State WA</td> <td>Zip Code 98501</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1"> <tr> <td>Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA</td> <td>Occupation (for Individual) STAFF REPRESENTATIVE</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>220.00</td> </tr> </table>			City Olympia	State WA	Zip Code 98501	Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA	Occupation (for Individual) STAFF REPRESENTATIVE	220.00	Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td>26</td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.207779 Amount of Each Receipt this Period <table border="1"> <tr> <td>10.00</td> </tr> </table> ☐ Memo Item	M M M	D D D	Y Y Y Y Y Y	11	26	2018	10.00
City Olympia	State WA	Zip Code 98501														
Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA	Occupation (for Individual) STAFF REPRESENTATIVE															
220.00																
M M M	D D D	Y Y Y Y Y Y														
11	26	2018														
10.00																
C. BYERS, ROBERT, F., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 740 Infantry Drive <table border="1"> <tr> <td>City Galloway</td> <td>State OH</td> <td>Zip Code 43119</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1"> <tr> <td>Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH</td> <td>Occupation (for Individual) STAFF REPRESENTATIVE</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>220.00</td> </tr> </table>			City Galloway	State OH	Zip Code 43119	Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) STAFF REPRESENTATIVE	220.00	Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td>26</td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.208772 Amount of Each Receipt this Period <table border="1"> <tr> <td>10.00</td> </tr> </table> ☐ Memo Item	M M M	D D D	Y Y Y Y Y Y	10	26	2018	10.00
City Galloway	State OH	Zip Code 43119														
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) STAFF REPRESENTATIVE															
220.00																
M M M	D D D	Y Y Y Y Y Y														
10	26	2018														
10.00																
SUBTOTAL of Receipts This Page (optional)..... ▶			<table border="1"> <tr> <td>30.00</td> </tr> </table>	30.00												
30.00																
TOTAL This Period (last page this line number only)..... ▶			<table border="1"> <tr> <td></td> </tr> </table>													

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 170 OF 1411

(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. BYERS, ROBERT, F., ,

Mailing Address 740 Infantry Drive

City
GallowayState
OHZip Code
43119FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209403

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BYERS, ROBERT, F., ,

Mailing Address 740 Infantry Drive

City
GallowayState
OHZip Code
43119FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210040

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CACCIAPAGLIA, GARRY, , ,

Mailing Address 2016 Price Street

City
RockfordState
ILZip Code
61103FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
WATER PLANT OPERATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

756.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	18	2018

Transaction ID : SA11AI.210764

Amount of Each Receipt this Period

84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

104.00

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 171 OF 1411

(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. CACCIAPAGLIA, GARRY, , ,

Mailing Address 2016 Price Street

City
Rockford

State
IL

Zip Code
61103

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
WATER PLANT OPERATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

798.00

Date of Receipt

11 / 05 / 2018

Transaction ID : SA11AI.208139

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CADD0, MARK, , ,

Mailing Address 260 Ward Avenue

City
Bellevue

State
KY

Zip Code
41073

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

661.88

Date of Receipt

11 / 06 / 2018

Transaction ID : SA11AI.210873

Amount of Each Receipt this Period

61.24

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CAIN-BABBITT, KATHLEEN, M., ,

Mailing Address 386 Kenneth Drive

City
Plainwell

State
MI

Zip Code
49080

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MI CN 25/LOCAL 1668

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

257.00

Date of Receipt

10 / 29 / 2018

Transaction ID : SA11AI.211361

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

113.24

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 172 OF 1411

(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. CAIN-BABBITT, KATHLEEN, M., ,

Mailing Address 386 Kenneth Drive

City
PlainwellState
MIZip Code
49080FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MI CN 25/LOCAL 1668Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.00

Date of Receipt

M M	D D	Y Y Y Y
11	07	2018

Transaction ID : SA11AI.211379

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CAIRA, PAULA, J., ,

Mailing Address 17 Fourteenth Street SE

City
WashingtonState
DCZip Code
20003FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
ASSOCIATE GENERAL COUNSEL II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1411.50

Date of Receipt

M M	D D	Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206211

Amount of Each Receipt this Period

72.11

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CAIRA, PAULA, J., ,

Mailing Address 17 Fourteenth Street SE

City
WashingtonState
DCZip Code
20003FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
ASSOCIATE GENERAL COUNSEL II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1483.61

Date of Receipt

M M	D D	Y Y Y Y
11	15	2018

Transaction ID : SA11AI.206568

Amount of Each Receipt this Period

72.11

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

154.22

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 173 OF 1411

(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. CALABRIA, ROBIN, , ,

Mailing Address 2507 Winslow Hill Road

City
BenezetteState
PAZip Code
15821FEC 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 ▼

733.04

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			08			2018			

Transaction ID : SA11AI.206998

Amount of Each Receipt this Period

66.64

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CALDWELL, PAMELA, D., ,

Mailing Address 1861 Bairsford Drive

City
ColumbusState
OHZip Code
43232FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2018			

Transaction ID : SA11AI.208773

Amount of Each Receipt this Period

18.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CALDWELL, PAMELA, D., ,

Mailing Address 1861 Bairsford Drive

City
ColumbusState
OHZip Code
43232FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

414.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			09			2018			

Transaction ID : SA11AI.209404

Amount of Each Receipt this Period

18.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

102.64

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 174 OF 1411

(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. CALDWELL, PAMELA, D., ,

Mailing Address 1861 Bairsford Drive

City
ColumbusState
OHZip Code
43232FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210041

Amount of Each Receipt this Period

18.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CAMERON, JOHN, , ,

Mailing Address 6555 N. Maplewood

City
ChicagoState
ILZip Code
60645FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31Occupation (for Individual)
DIRECTOR POL./COM. RELATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

Transaction ID : SA11AI.208140

Amount of Each Receipt this Period

90.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CAMERON, SUSAN, , ,

Mailing Address P.O. Box 32

City
ManistiqueState
MIZip Code
49854FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MI CN 25Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

441.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2018

Transaction ID : SA11AI.211334

Amount of Each Receipt this Period

21.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

129.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 175 OF 1411

(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. CAMERON, SUSAN, , ,

Mailing Address P.O. Box 32

City

Manistique

State

MI

Zip Code

49854

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MI CN 25

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	20	/	2018

Transaction ID : SA11AI.211380

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CAMP, AGATHA, M., ,

Mailing Address 9413 Bay Colony Drive

City

Des Plaines

State

IL

Zip Code

60016

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

MENTAL HEALTH TECH I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

Transaction ID : SA11AI.208141

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CAMPBELL, C. DARRICK, , ,

Mailing Address 3149 Timberhill Lane

City

Aurora

State

IL

Zip Code

60507

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

JUVENILE JUSTICE OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

Transaction ID : SA11AI.208142

Amount of Each Receipt this Period

21.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

72.00

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 176 OF 1411

(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. CAMPBELL, DEIRDRE, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207573

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CAMPBELL, DEIRDRE, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207780

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CAMPBELL, JAMES, C ., ,

Mailing Address 250 Gay Street

City
Jackson

State
OH

Zip Code
45640

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 ▼

204.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210042

Amount of Each Receipt this Period

8.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

28.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 177 OF 1411
(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. CAMPBELL, KENYATA, N., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 4950 McAllister Avenue <table border="1"> <tr> <td>City Columbus</td> <td>State OH</td> <td>Zip Code 43227</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1"> <tr> <td>Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH</td> <td>Occupation (for Individual) ADMINISTRATIVE PROFESSIONAL</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>207.00</td> </tr> </table>			City Columbus	State OH	Zip Code 43227	Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) ADMINISTRATIVE PROFESSIONAL	207.00	Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td>09</td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.209406 Amount of Each Receipt this Period <table border="1"> <tr> <td>9.00</td> </tr> </table> ☐ Memo Item	M M M	D D D	Y Y Y Y Y Y	11	09	2018	9.00
City Columbus	State OH	Zip Code 43227														
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) ADMINISTRATIVE PROFESSIONAL															
207.00																
M M M	D D D	Y Y Y Y Y Y														
11	09	2018														
9.00																
B. CAMPBELL, KENYATA, N., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 4950 McAllister Avenue <table border="1"> <tr> <td>City Columbus</td> <td>State OH</td> <td>Zip Code 43227</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1"> <tr> <td>Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH</td> <td>Occupation (for Individual) ADMINISTRATIVE PROFESSIONAL</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>216.00</td> </tr> </table>			City Columbus	State OH	Zip Code 43227	Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) ADMINISTRATIVE PROFESSIONAL	216.00	Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td>23</td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.210043 Amount of Each Receipt this Period <table border="1"> <tr> <td>9.00</td> </tr> </table> ☐ Memo Item	M M M	D D D	Y Y Y Y Y Y	11	23	2018	9.00
City Columbus	State OH	Zip Code 43227														
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) ADMINISTRATIVE PROFESSIONAL															
216.00																
M M M	D D D	Y Y Y Y Y Y														
11	23	2018														
9.00																
C. CAMPBELL, TERESA, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 3709 Morgan Road <table border="1"> <tr> <td>City Lake Orion</td> <td>State MI</td> <td>Zip Code 48359</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1"> <tr> <td>Name of Employer (for Individual) AFSCME MI CN 25</td> <td>Occupation (for Individual) STAFF REPRESENTATIVE</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>441.00</td> </tr> </table>			City Lake Orion	State MI	Zip Code 48359	Name of Employer (for Individual) AFSCME MI CN 25	Occupation (for Individual) STAFF REPRESENTATIVE	441.00	Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td>07</td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.211335 Amount of Each Receipt this Period <table border="1"> <tr> <td>21.00</td> </tr> </table> ☐ Memo Item	M M M	D D D	Y Y Y Y Y Y	11	07	2018	21.00
City Lake Orion	State MI	Zip Code 48359														
Name of Employer (for Individual) AFSCME MI CN 25	Occupation (for Individual) STAFF REPRESENTATIVE															
441.00																
M M M	D D D	Y Y Y Y Y Y														
11	07	2018														
21.00																
SUBTOTAL of Receipts This Page (optional)..... ▶			<table border="1"> <tr> <td>39.00</td> </tr> </table>	39.00												
39.00																
TOTAL This Period (last page this line number only)..... ▶			<table border="1"> <tr> <td></td> </tr> </table>													

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 178 OF 1411

(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. CAMPBELL, TERESA, , ,

Mailing Address 3709 Morgan Road

City

Lake Orion

State

MI

Zip Code

48359

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MI CN 25

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 20 / 2018

Transaction ID : SA11AI.211381

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CAMPOLO, JEANA, L., ,

Mailing Address 504 E. Burgess Street

City

Mount Vernon

State

OH

Zip Code

43050

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

638.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208776

Amount of Each Receipt this Period

29.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CAMPOLO, JEANA, L., ,

Mailing Address 504 E. Burgess Street

City

Mount Vernon

State

OH

Zip Code

43050

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

667.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209407

Amount of Each Receipt this Period

29.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

79.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 179 OF 1411

(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. CAMPOLO, JEANA, L., ,

Mailing Address 504 E. Burgess Street

City

Mount Vernon

State

OH

Zip Code

43050

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

696.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210044

Amount of Each Receipt this Period

29.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CAMPOLONG, ROBERT, J., ,

Mailing Address 309 W. Pine Street

City

Clearfield

State

PA

Zip Code

16830

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206999

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CANALES, MARIA, , ,

Mailing Address 1212 Jefferson Street SE

City

Olympia

State

WA

Zip Code

98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.207203

Amount of Each Receipt this Period

70.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

139.00

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 180 OF 1411

(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. CANAN-STEPHENS, LINDA, , ,

Mailing Address 9013 Advantage Court

City
Burke

State
VA

Zip Code
22015

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L/STATE STREET

Occupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1157.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 02 / 2018

Transaction ID : SA11AI.206570

Amount of Each Receipt this Period

101.70

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CANT, PAMELA, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207574

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CANT, PAMELA, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207781

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

121.70

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 181 OF 1411

(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. CANTRELL, JEREMEE, M., ,

Mailing Address 28 S. Bowman Road

City
Chillicothe

State
OH

Zip Code
45601

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208777

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CANTRELL, JEREMEE, M., ,

Mailing Address 28 S. Bowman Road

City
Chillicothe

State
OH

Zip Code
45601

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 ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209408

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CANTRELL, JEREMEE, M., ,

Mailing Address 28 S. Bowman Road

City
Chillicothe

State
OH

Zip Code
45601

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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210045

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 182 OF 1411

(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. CANTU, SERGIO, F., ,

Mailing Address 2200 Aberdeen Avenue

City
McKinneyState
TXZip Code
75070FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
POLITICAL ACTION REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.91

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2018			

Transaction ID : SA11AI.206213

Amount of Each Receipt this Period

39.55

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CANTU, SERGIO, F., ,

Mailing Address 2200 Aberdeen Avenue

City
McKinneyState
TXZip Code
75070FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
POLITICAL ACTION REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.46

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2018			

Transaction ID : SA11AI.206571

Amount of Each Receipt this Period

39.55

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CAPONI, LISA, M., ,

Mailing Address 29 Shadow Drive

City
PittsburghState
PAZip Code
15227FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
FIELD OFFICE ASST. I

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

519.80

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2018			

Transaction ID : SA11AI.206214

Amount of Each Receipt this Period

23.74

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

102.84

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 183 OF 1411

(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. CAPONI, LISA, M., ,

Mailing Address 29 Shadow Drive

City
PittsburghState
PAZip Code
15227FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
FIELD OFFICE ASST. I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

543.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2018

Transaction ID : SA11AI.206572

Amount of Each Receipt this Period

23.85

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CAPONI, RICHARD, , ,

Mailing Address 4453 Stilley Road

City
PittsburghState
PAZip Code
15227FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.26

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2018

Transaction ID : SA11AI.207000

Amount of Each Receipt this Period

125.24

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CARABALLO, BEVERLY, L., ,

Mailing Address 3715 N Hogan Drive

City
LorainState
OHZip Code
44053FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ODJFS CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.209409

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

158.09

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 184 OF 1411

(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. CARABALLO, BEVERLY, L., ,

Mailing Address 3715 N Hogan Drive

City
Lorain

State
OH

Zip Code
44053

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ODJFS CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210046

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CARBENIA, GINO, A., ,

Mailing Address 9315 N. Park Avenue

City
Indianapolis

State
IN

Zip Code
46240

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2482.40

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206215

Amount of Each Receipt this Period

120.52

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CARBENIA, GINO, A., ,

Mailing Address 9315 N. Park Avenue

City
Indianapolis

State
IN

Zip Code
46240

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2602.92

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206573

Amount of Each Receipt this Period

120.52

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.04

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 185 OF 1411

(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
ColumbusState
OHZip Code
43216FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

682.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.208779

Amount of Each Receipt this Period

31.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CAREY, DAMETRA, , ,

Mailing Address P.O. Box 1222

City
ColumbusState
OHZip Code
43216FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

713.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209410

Amount of Each Receipt this Period

31.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CAREY, DAMETRA, , ,

Mailing Address P.O. Box 1222

City
ColumbusState
OHZip Code
43216FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210047

Amount of Each Receipt this Period

31.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

93.00

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 186 OF 1411

(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, 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 ▼

244.70

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207001

Amount of Each Receipt this Period

48.94

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CARL, PAMELA, I., ,

Mailing Address 1021 K Street

City
Centralia

State
WA

Zip Code
98531

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28

Occupation (for Individual)
VMO COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2018

Transaction ID : SA11AI.207782

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CARLETON, DAVID, A., ,

Mailing Address 5922 Opal Street

City
North Ridgevill

State
OH

Zip Code
44039

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 ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210048

Amount of Each Receipt this Period

8.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

78.44

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 187 OF 1411

(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. CARLOSS, ANGELA, L., ,

Mailing Address 9675 Gertrude Lane

City
Cincinnati

State
OH

Zip Code
45231

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/CINCINNATI CITY

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.88

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.210874

Amount of Each Receipt this Period

28.86

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. 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 ▼

756.10

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208143

Amount of Each Receipt this Period

63.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CARPENTER, CHARLES, D., ,

Mailing Address 131 Maynell Street

City
Modesto

State
CA

Zip Code
95354

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA CN 57

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

200.40

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.211224

Amount of Each Receipt this Period

8.35

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.21

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 188 OF 1411

(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. CARPENTER, MELISSA, , ,

Mailing Address 2715 E 13th Avenue

City
SpokaneState
WAZip Code
99202FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28Occupation (for Individual)
FIELD SUPERVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M	D D	Y Y Y Y
11	14	2018

Transaction ID : SA11AI.207783

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CARROLL, JESSICA, E., ,

Mailing Address P.O. Box 711570

City

Mountain View

State

HI

Zip Code

96771

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 152Occupation (for Individual)
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
11	01	2018

Transaction ID : SA11AI.210985

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CARSON, SEAN, RAY, ,

Mailing Address 238 N Liberty Street

City

Nazareth

State

PA

Zip Code

18064

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/NSP/LOCAL 1435Occupation (for Individual)
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
11	08	2018

Transaction ID : SA11AI.207002

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

102.00

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 189 OF 1411

(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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CARTER, AUDREY, , ,

Mailing Address 17751 Cedar Avenue

City

Country Club HI

State

IL

Zip Code

60478

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 COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.43

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208144

Amount of Each Receipt this Period

41.66

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CARTER, CHAD, , ,

Mailing Address 6653 13th Street NW

City

Washington

State

DC

Zip Code

20012

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

MANAGER, MEMBER AND AFFILIATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1479.80

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206217

Amount of Each Receipt this Period

64.19

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CARTER, CHAD, , ,

Mailing Address 6653 13th Street NW

City

Washington

State

DC

Zip Code

20012

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

MANAGER, MEMBER AND AFFILIATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1543.99

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206575

Amount of Each Receipt this Period

64.19

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

170.04

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 190 OF 1411
(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. CARTER, ELEANOR, D., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 574 Johns Avenue <table border="1"> <tr> <td>City Mansfield</td> <td>State OH</td> <td>Zip Code 44903</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1"> <tr> <td>Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH</td> <td>Occupation (for Individual) CLERK III</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>345.00</td> </tr> </table>			City Mansfield	State OH	Zip Code 44903	Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) CLERK III	345.00	Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td>26</td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.208781 Amount of Each Receipt this Period <table border="1"> <tr> <td>17.50</td> </tr> </table> ☐ Memo Item	M M M	D D D	Y Y Y Y Y Y	10	26	2018	17.50
City Mansfield	State OH	Zip Code 44903														
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) CLERK III															
345.00																
M M M	D D D	Y Y Y Y Y Y														
10	26	2018														
17.50																
B. CARTER, ELEANOR, D., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 574 Johns Avenue <table border="1"> <tr> <td>City Mansfield</td> <td>State OH</td> <td>Zip Code 44903</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1"> <tr> <td>Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH</td> <td>Occupation (for Individual) CLERK III</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>362.50</td> </tr> </table>			City Mansfield	State OH	Zip Code 44903	Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) CLERK III	362.50	Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td>09</td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.209412 Amount of Each Receipt this Period <table border="1"> <tr> <td>17.50</td> </tr> </table> ☐ Memo Item	M M M	D D D	Y Y Y Y Y Y	11	09	2018	17.50
City Mansfield	State OH	Zip Code 44903														
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) CLERK III															
362.50																
M M M	D D D	Y Y Y Y Y Y														
11	09	2018														
17.50																
C. CARTER, ELEANOR, D., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 574 Johns Avenue <table border="1"> <tr> <td>City Mansfield</td> <td>State OH</td> <td>Zip Code 44903</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1"> <tr> <td>Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH</td> <td>Occupation (for Individual) CLERK III</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>380.00</td> </tr> </table>			City Mansfield	State OH	Zip Code 44903	Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) CLERK III	380.00	Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td>23</td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.210049 Amount of Each Receipt this Period <table border="1"> <tr> <td>17.50</td> </tr> </table> ☐ Memo Item	M M M	D D D	Y Y Y Y Y Y	11	23	2018	17.50
City Mansfield	State OH	Zip Code 44903														
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) CLERK III															
380.00																
M M M	D D D	Y Y Y Y Y Y														
11	23	2018														
17.50																
SUBTOTAL of Receipts This Page (optional).....			<table border="1"> <tr> <td>52.50</td> </tr> </table>	52.50												
52.50																
TOTAL This Period (last page this line number only).....			<table border="1"> <tr> <td></td> </tr> </table>													

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 191 OF 1411

(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. CARTER, JAMES, R., ,

Mailing Address 2612 Findley Drive

City
SpringfieldState
ILZip Code
62704FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
OFFICE ASSOCIATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.82

Date of Receipt

M M	D D	Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208145

Amount of Each Receipt this Period

31.26

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CARTER, JANE, M., ,Mailing Address 308 East Capitol Street NE
#2City
WashingtonState
DCZip Code
20003FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
LABOR ECONOMIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1939.66

Date of Receipt

M M	D D	Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206218

Amount of Each Receipt this Period

95.22

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CARTER, JANE, M., ,Mailing Address 308 East Capitol Street NE
#2City
WashingtonState
DCZip Code
20003FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
LABOR ECONOMIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2034.88

Date of Receipt

M M	D D	Y Y Y Y
11	15	2018

Transaction ID : SA11AI.206576

Amount of Each Receipt this Period

95.22

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

221.70

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CARTER, JUAN, , ,

Mailing Address 1716 Revere Street

City
Harrisburg

State
PA

Zip Code
17104

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 ▼

656.34

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207003

Amount of Each Receipt this Period

60.74

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CARTER, LLOYD, , ,

Mailing Address 579 Pointe Court SW

City
Rochester

State
MN

Zip Code
55902

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211642

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CARTER, PHILLIP, , ,

Mailing Address 27 Cherry Street

City
Newark

State
OH

Zip Code
43055

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
DELIVERY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208782

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

93.74

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 193 OF 1411

(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. CARTER, PHILLIP, , ,

Mailing Address 27 Cherry Street

City
Newark

State
OH

Zip Code
43055

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
DELIVERY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209413

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CARTER, PHILLIP, , ,

Mailing Address 27 Cherry Street

City
Newark

State
OH

Zip Code
43055

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
DELIVERY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210050

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CARTER, ROSIE, , ,

Mailing Address 137 N Austin

City
Chicago

State
IL

Zip Code
60644

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
SENIOR LIBRARY CLERK

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

416.60

Date of Receipt

11 / 05 / 2018

Transaction ID : SA11AI.208146

Amount of Each Receipt this Period

41.66

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

67.66

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 194 OF 1411

(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. CARTER, TRACI, R., ,

Mailing Address 624 Ewing Avenue

City
Lima

State
OH

Zip Code
45801

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208783

Amount of Each Receipt this Period

17.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CARTER, TRACI, R., ,

Mailing Address 624 Ewing Avenue

City
Lima

State
OH

Zip Code
45801

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209414

Amount of Each Receipt this Period

17.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CARTER, TRACI, R., ,

Mailing Address 624 Ewing Avenue

City
Lima

State
OH

Zip Code
45801

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

408.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210051

Amount of Each Receipt this Period

17.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

51.00

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 195 OF 1411

(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. CARTER-HICKS, LESLIE, A., ,

Mailing Address 267 Buckskin Street

City
Henderson

State
NV

Zip Code
89074

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
FIELD COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

923.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206219

Amount of Each Receipt this Period

45.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CARTER-HICKS, LESLIE, A., ,

Mailing Address 267 Buckskin Street

City
Henderson

State
NV

Zip Code
89074

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
FIELD COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

968.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206577

Amount of Each Receipt this Period

45.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CARVALHO, MICHAEL, , ,

Mailing Address 320 Dale Drive

City
Silver Spring

State
MD

Zip Code
20910

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
SENIOR DIGITAL STRATEGY COORD

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

971.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206220

Amount of Each Receipt this Period

45.10

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 196 OF 1411

(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. CARVALHO, MICHAEL, , ,

Mailing Address 320 Dale Drive

City
Silver Spring

State
MD

Zip Code
20910

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

SENIOR DIGITAL STRATEGY COORD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1016.74

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206578

Amount of Each Receipt this Period

45.10

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CASEY, TROY, M., ,

Mailing Address 1426 North School Street

City
Honolulu

State
HI

Zip Code
96817

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME HI LOC 646

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.211280

Amount of Each Receipt this Period

41.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CASON, ROBERT, , ,

Mailing Address 4301 Executive Park Drive

City
Harrisburg

State
PA

Zip Code
17111

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME PA CN 13

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1169.30

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207004

Amount of Each Receipt this Period

106.30

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

193.07

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CASSADY, CHRISTINA, D., ,

Mailing Address 2712 Charles Drive

City
Grove City

State
OH

Zip Code
43123

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
PUBLIC UTILITIES CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

682.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208784

Amount of Each Receipt this Period

31.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CASSADY, CHRISTINA, D., ,

Mailing Address 2712 Charles Drive

City
Grove City

State
OH

Zip Code
43123

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
PUBLIC UTILITIES CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

713.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209415

Amount of Each Receipt this Period

31.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CASSADY, CHRISTINA, D., ,

Mailing Address 2712 Charles Drive

City
Grove City

State
OH

Zip Code
43123

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
PUBLIC UTILITIES CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210052

Amount of Each Receipt this Period

31.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

93.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 198 OF 1411

(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. CASSIDY, DEBRA, K., ,

Mailing Address 12580 170th Sreet N

City

Marine On Saint

State

MN

Zip Code

55047

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

603.30

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211643

Amount of Each Receipt this Period

83.90

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CASTILLO, VICTOR, , ,

Mailing Address 37 E 5th Street

City

London

State

OH

Zip Code

43140

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 ▼

209.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208785

Amount of Each Receipt this Period

9.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CASTILLO, VICTOR, , ,

Mailing Address 37 E 5th Street

City

London

State

OH

Zip Code

43140

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 ▼

218.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209416

Amount of Each Receipt this Period

9.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

102.90

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 199 OF 1411

(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. CASTILLO, VICTOR, , ,

Mailing Address 37 E 5th Street

City
London

State
OH

Zip Code
43140

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 ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210053

Amount of Each Receipt this Period

9.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CASTLE, GWENDOLYN, , ,

Mailing Address 48 Ridge Drive
Apt. 205

City
Fairfield

State
OH

Zip Code
45014

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
EMPLOYER SERVICES SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208786

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CASTLE, GWENDOLYN, , ,

Mailing Address 48 Ridge Drive
Apt. 205

City
Fairfield

State
OH

Zip Code
45014

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
EMPLOYER SERVICES SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209417

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

29.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 200 OF 1411

(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. CASTLE, GWENDOLYN, , ,

Mailing Address 48 Ridge Drive
Apt. 205

City
Fairfield

State
OH

Zip Code
45014

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
EMPLOYER SERVICES SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210054

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CASTRO, GERMAN, F., ,

Mailing Address 109 Lake Thomas Drive

City

Winter Haven

State
FL

Zip Code
33880

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1029.63

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206221

Amount of Each Receipt this Period

52.07

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CASTRO, GERMAN, F., ,

Mailing Address 109 Lake Thomas Drive

City

Winter Haven

State
FL

Zip Code
33880

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1081.70

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206579

Amount of Each Receipt this Period

52.07

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

114.14

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
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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. CASTRO, NORMA, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 25 / 2018

Transaction ID : SA11AI.207374

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CASTRO, NORMA, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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 Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207575

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CASTRO, NORMA, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207784

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CATCHINGS, THERINZO, , ,

Mailing Address 1212 Jefferson Street SE

 City
 Olympia

 State
 WA

 Zip Code
 98501

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.207576

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CATCHINGS, THERINZO, , ,

Mailing Address 1212 Jefferson Street SE

 City
 Olympia

 State
 WA

 Zip Code
 98501

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2018

Transaction ID : SA11AI.207785

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CATEZONE, RICHARD, A., ,

Mailing Address 354 W 27th Street

 City
 Chiacgo

 State
 IL

 Zip Code
 60616

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME IL CN 31/STATE OF IL

 Occupation (for Individual)
 EXECUTIVE II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

Transaction ID : SA11AI.208147

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CAUDLE, KATHERINE, R., ,

Mailing Address 296 Churchmans Road

City
New CastleState
DEZip Code
19720FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME DE CN 81Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.36

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			19			2018			

Transaction ID : SA11AI.211262

Amount of Each Receipt this Period

27.12

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CAUDLE, KATHERINE, R., ,

Mailing Address 296 Churchmans Road

City
New CastleState
DEZip Code
19720FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME DE CN 81Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.48

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			14			2018			

Transaction ID : SA11AI.211269

Amount of Each Receipt this Period

27.12

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CAUGHEY-WILSON, TARA, , ,

Mailing Address 114 Thompson Street

City
DaltonState
PAZip Code
18414FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13Occupation (for Individual)
CLERK

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1355.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			08			2018			

Transaction ID : SA11AI.207005

Amount of Each Receipt this Period

102.80

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

157.04

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CAUMIANT, EDDIE, A., ,

Mailing Address 120 S. Virginia Avenue

City
BellevilleState
ILZip Code
62220FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

942.02

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2018			

Transaction ID : SA11AI.208148

Amount of Each Receipt this Period

94.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CAVANAH, MARK, E., ,

Mailing Address 243 Iroquois Drive

City
PaducahState
KYZip Code
42001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
EXECUTIVE ASST. TO SEC. TREAS.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1474.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2018			

Transaction ID : SA11AI.206222

Amount of Each Receipt this Period

53.78

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CAVANAH, MARK, E., ,

Mailing Address 243 Iroquois Drive

City
PaducahState
KYZip Code
42001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
EXECUTIVE ASST. TO SEC. TREAS.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1528.05

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2018			

Transaction ID : SA11AI.206580

Amount of Each Receipt this Period

53.78

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

201.76

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CAVANAUGH, ANNE-MARIE, , ,

Mailing Address 9227 Densmore Avenue N

City
Seattle

State
WA

Zip Code
98103

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28

Occupation (for Individual)

COUNCIL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.48

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2018

Transaction ID : SA11AI.207786

Amount of Each Receipt this Period

41.68

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CAYOT, CLARK, C., ,

Mailing Address 17935 State Route 739

City
Richwood

State
OH

Zip Code
43344

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 ▼

209.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208787

Amount of Each Receipt this Period

9.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CAYOT, CLARK, C., ,

Mailing Address 17935 State Route 739

City
Richwood

State
OH

Zip Code
43344

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 ▼

218.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209418

Amount of Each Receipt this Period

9.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.68

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CAYOT, CLARK, C., ,

Mailing Address 17935 State Route 739

City
RichwoodState
OHZip Code
43344FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210055

Amount of Each Receipt this Period

9.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHAI, JODI, E., ,

Mailing Address 1374 Mailani Street

City
HiloState
HIZip Code
96720FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 152Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	01	2018

Transaction ID : SA11AI.210986

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHAMPAGNE, RICHARD, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	25	2018

Transaction ID : SA11AI.207376

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

64.50

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	☐ 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. CHAMPAGNE, RICHARD, , ,

Mailing Address 1212 Jefferson Street SE

 City
 Olympia

 State
 WA

 Zip Code
 98501

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.207577

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHAMPAGNE, RICHARD, , ,

Mailing Address 1212 Jefferson Street SE

 City
 Olympia

 State
 WA

 Zip Code
 98501

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2018

Transaction ID : SA11AI.207787

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHAPEK, CHRIS, J., ,

 Mailing Address 3945 Forbes Avenue
 #262

 City
 Pittsburgh

 State
 PA

 Zip Code
 15213

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME INT'L

 Occupation (for Individual)
 FIELD DATA COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2018

Transaction ID : SA11AI.206223

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHAPEK, CHRIS, J., ,

Mailing Address 3945 Forbes Avenue
#262

City
Pittsburgh

State
PA

Zip Code
15213

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
FIELD DATA COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1129.88

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206581

Amount of Each Receipt this Period

50.68

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHAPMAN, ERNESTINE, , ,

Mailing Address 146 Penn Avenue

City
Mansfield

State
OH

Zip Code
44903

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
STOREKEEPER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208788

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHAPMAN, ERNESTINE, , ,

Mailing Address 146 Penn Avenue

City
Mansfield

State
OH

Zip Code
44903

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
STOREKEEPER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209419

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.68

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHAPMAN, ERNESTINE, , ,

Mailing Address 146 Penn Avenue

City
Mansfield

State
OH

Zip Code
44903

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
STOREKEEPER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210056

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHAPPELL, RALPH, , ,

Mailing Address 374 Murray Avenue

City
Englewood

State
NJ

Zip Code
07631-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L/STATE STREET

Occupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 02 / 2018

Transaction ID : SA11AI.206582

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHARLES, JARED, T., ,

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 (for Individual)
AFSCME MN CN 5/CN14

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2288.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211644

Amount of Each Receipt this Period

312.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

377.00

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHATFIELD, JACK, Z., ,

Mailing Address 622 1/2 E Church Street

City
Marion

State
OH

Zip Code
43302

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 ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208789

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHATFIELD, JACK, Z., ,

Mailing Address 622 1/2 E Church Street

City
Marion

State
OH

Zip Code
43302

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 ▼

241.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209420

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHATFIELD, JACK, Z., ,

Mailing Address 622 1/2 E Church Street

City
Marion

State
OH

Zip Code
43302

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 ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210057

Amount of Each Receipt this Period

10.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

31.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHAVEZ, HEATHER, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207578

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHAVEZ, HEATHER, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207788

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHAVEZ, JEANETTE, , ,

Mailing Address 1719 Lyman Place NE

City
WashingtonState
DCZip Code
20002FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
EXECUTIVE OFFICE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1472.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206224

Amount of Each Receipt this Period

64.51

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

84.51

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHAVEZ, JEANETTE, , ,

Mailing Address 1719 Lyman Place NE

City
Washington

State
DC

Zip Code
20002

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

EXECUTIVE OFFICE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1536.71

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206583

Amount of Each Receipt this Period

64.51

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHAVIS, KEVIN, A., ,

Mailing Address 15 East Franklin Avenue S
Apt. 3

City
Minneapolis

State
MN

Zip Code
55404

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)

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
11 / 01 / 2018

Transaction ID : SA11AI.211645

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHEBIUM, SUBRAMANYAM, , ,

Mailing Address 15713 Allnutt Lane

City
Burtonsville

State
MD

Zip Code
20866

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

921.72

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206225

Amount of Each Receipt this Period

45.10

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

139.61

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHEBIUM, SUBRAMANYAM, , ,

Mailing Address 15713 Allnutt Lane

City
Burtonsville

State
MD

Zip Code
20866

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

966.82

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206584

Amount of Each Receipt this Period

45.10

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHESTER, JESSICA, , ,

Mailing Address 390 Worthington Road

City
Westerville

State
OH

Zip Code
43082

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210058

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHILDRESS, KARL, E., ,

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 (for Individual)

AFSCME INT'L

Occupation (for Individual)

MANAGER, APPLICATIONS DEVELOP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1156.40

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206226

Amount of Each Receipt this Period

57.82

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

122.92

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHILDRESS, KARL, E., ,

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 (for Individual)

AFSCME INT'L

Occupation (for Individual)

MANAGER, APPLICATIONS DEVELOP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1214.22

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206585

Amount of Each Receipt this Period

57.82

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHING, M. LEILANI, , ,

Mailing Address 80 Swan Way
Suite 110

City
Oakland

State
CA

Zip Code
94621

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME CA CN 57

Occupation (for Individual)

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
11 / 07 / 2018

Transaction ID : SA11AI.211225

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHIRI, USHETO, U, ,

Mailing Address 2000 West Broadway
Apt. 103

City
Minneapolis

State
MN

Zip Code
55411

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MN CN 5/CN14

Occupation (for Individual)

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
11 / 01 / 2018

Transaction ID : SA11AI.211646

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

97.82

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHIVIS, NICHELLE, , ,

Mailing Address 4301 Executive Park Drive

City
HarrisburgState
PAZip Code
17111FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			08			2018			

Transaction ID : SA11AI.207006

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHONG, HEY, S., ,

Mailing Address 1441 Harvard Street NW

City
WashingtonState
DCZip Code
20009FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
VIDEO PRODUCER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2018			

Transaction ID : SA11AI.206227

Amount of Each Receipt this Period

20.28

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHONG, HEY, S., ,

Mailing Address 1441 Harvard Street NW

City
WashingtonState
DCZip Code
20009FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
VIDEO PRODUCER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

423.48

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2018			

Transaction ID : SA11AI.206586

Amount of Each Receipt this Period

20.28

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

140.56

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
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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. **CHONKO, DEBORAH, , ,**

Mailing Address 6800 N High Street

City
Worthington

State
OH

Zip Code
43085

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

646.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210875

Amount of Each Receipt this Period

59.78

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **CHRISTENSEN, SHARON, C., ,**

Mailing Address 7315 Nicollet Avenue

City
Richfield

State
MN

Zip Code
55423

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211647

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **CHRISTIAN, DEBORAH, , ,**

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207579

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

89.78

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 217 OF 1411
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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHRISTIAN, DEBORAH, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
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
11	26	2018

Transaction ID : SA11AI.207789

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHULLANANDANA, RATHAPOL, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
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
11	09	2018

Transaction ID : SA11AI.207580

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHULLANANDANA, RATHAPOL, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
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
11	26	2018

Transaction ID : SA11AI.207790

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

30.00

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHUN, SANFORD, , ,

Mailing Address 98-1664 Hapaki Street

City
AieaState
HIZip Code
96701FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 152Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.210987

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHURCH, CRYSTAL, D., ,

Mailing Address 1884 Aaugust Drive

City
OntarioState
OHZip Code
44906FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210059

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CILIENTO, ANTHONY, , ,

Mailing Address 1714 Bay Street SE

City
WashingtonState
DCZip Code
20003FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
POLITICAL ACTION REP I

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

871.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206229

Amount of Each Receipt this Period

43.99

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

77.49

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CILIENTO, ANTHONY, , ,

Mailing Address 1714 Bay Street SE

City
Washington

State
DC

Zip Code
20003

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
POLITICAL ACTION REP I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.12

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206588

Amount of Each Receipt this Period

43.99

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CINKO, GARY, L., , JR.

Mailing Address 5300 S. Main Street

City
Westover

State
PA

Zip Code
16692

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)
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
10 / 31 / 2018

Transaction ID : SA11AI.207007

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CLAPPER, LORI, L., ,

Mailing Address 82 Sychar Road

City
Mount Vernon

State
OH

Zip Code
43050

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
THERAPUTIC PROGRAM TECHNICIAI

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208791

Amount of Each Receipt this Period

14.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

77.99

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CLAPPER, LORI, L., ,

Mailing Address 82 Sychar Road

City

Mount Vernon

State

OH

Zip Code

43050

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209422

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CLAPPER, LORI, L., ,

Mailing Address 82 Sychar Road

City

Mount Vernon

State

OH

Zip Code

43050

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210060

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CLARK, BRANDON, M., ,

Mailing Address 1089 Claudia Avenue
Apt. C

City

London

State

OH

Zip Code

43140

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 ▼

220.00

Date of Receipt

10 / 26 / 2018

Transaction ID : SA11AI.208792

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

38.00

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
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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. CLARK, BRANDON, M., ,

Mailing Address 1089 Claudia Avenue
Apt. C

City State Zip Code
London OH 43140

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 ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209423

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CLARK, BRANDON, M., ,

Mailing Address 1089 Claudia Avenue
Apt. C

City State Zip Code
London OH 43140

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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210061

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CLARK, JAQUANDA, , ,

Mailing Address 7059 Treebourne Drive

City State Zip Code
Reynoldsburg OH 43068

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
JUVENILE CORRECTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210062

Amount of Each Receipt this Period

8.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

28.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CLARK, JOSEPH, , , JR.

Mailing Address 1941 Fairwood Avenue

City
ColumbusState
OHZip Code
43207FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

INT'L UNION REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1356.36

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206230

Amount of Each Receipt this Period

67.44

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CLARK, JOSEPH, , , JR.

Mailing Address 1941 Fairwood Avenue

City
ColumbusState
OHZip Code
43207FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

INT'L UNION REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1423.80

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	15	2018

Transaction ID : SA11AI.206589

Amount of Each Receipt this Period

67.44

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CLARK, MATRELLE, C., ,

Mailing Address 519 Long Street

City
CambridgeState
OHZip Code
43725FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.208794

Amount of Each Receipt this Period

14.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

149.38

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 223 OF 1411

(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. CLARK, MATRELLE, C., ,

Mailing Address 519 Long Street

City

Cambridge

State

OH

Zip Code

43725

FEC ID number of contributing
federal political committee.

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.209425

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CLARK, MATRELLE, C., ,

Mailing Address 519 Long Street

City

Cambridge

State

OH

Zip Code

43725

FEC ID number of contributing
federal political committee.

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.210063

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CLARK, MICHAEL, A., ,

Mailing Address 1012 Charles Street

City

Galion

State

OH

Zip Code

44833

FEC ID number of contributing
federal political committee.

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 ▼

Date of Receipt

 / /

Transaction ID : SA11AI.208795

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 224 OF 1411

(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. CLARK, MICHAEL, A., ,

Mailing Address 1012 Charles Street

City
GalionState
OHZip Code
44833FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209426

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CLARK, MICHAEL, A., ,

Mailing Address 1012 Charles Street

City
GalionState
OHZip Code
44833FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210064

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CLARK, SARAH, J., ,

Mailing Address 509 Brown Street

City
Iowa CityState
IAZip Code
52245FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/STATE OF IAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	18	2018

Transaction ID : SA11AI.211890

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

51.00

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 225 OF 1411

(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. CLARK, SHANE, , ,

Mailing Address 5296 Autumnwood Drive

City
Cochranon

State
PA

Zip Code
16314

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 ▼

856.72

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207008

Amount of Each Receipt this Period

78.42

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CLARK, VERA, E., ,

Mailing Address 1740 Piedmont Road

City
Columbus

State
OH

Zip Code
43224

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
FINANCIAL ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208796

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CLARK, VERA, E., ,

Mailing Address 1740 Piedmont Road

City
Columbus

State
OH

Zip Code
43224

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
FINANCIAL ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209427

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

98.42

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 226 OF 1411

(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. CLARK, VERA, E., ,

Mailing Address 1740 Piedmont Road

City
Columbus

State
OH

Zip Code
43224

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
FINANCIAL ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210065

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CLARKE, MICHAEL, J., ,

Mailing Address 6800 N High Street

City
Worthington

State
OH

Zip Code
43085

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/METROHEALTH

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.210787

Amount of Each Receipt this Period

9.62

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CLARKE, MICHAEL, J., ,

Mailing Address 6800 N High Street

City
Worthington

State
OH

Zip Code
43085

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/METROHEALTH

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

221.26

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 13 / 2018

Transaction ID : SA11AI.210876

Amount of Each Receipt this Period

9.62

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

29.24

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CLARY, DENNIS, J., ,

Mailing Address 35701 Smith Chapel Road

City
LoganState
OHZip Code
43138FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.208797

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CLARY, DENNIS, J., ,

Mailing Address 35701 Smith Chapel Road

City
LoganState
OHZip Code
43138FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209428

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CLARY, DENNIS, J., ,

Mailing Address 35701 Smith Chapel Road

City
LoganState
OHZip Code
43138FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210066

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

30.00

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 228 OF 1411

(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. CLAYTON, BARRY, M., ,

Mailing Address 700 Leetonia Road

City
Marion

State
OH

Zip Code
43302

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 ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208798

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CLAYTON, BARRY, M., ,

Mailing Address 700 Leetonia Road

City
Marion

State
OH

Zip Code
43302

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 ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209429

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CLAYTON, BARRY, M., ,

Mailing Address 700 Leetonia Road

City
Marion

State
OH

Zip Code
43302

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 ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210067

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

30.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CLEMONS, BYRON, E., ,

Mailing Address 2719 Hillcrest Avenue

City
AltonState
ILZip Code
62002FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
SEC THERAPY AIDE I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.86

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208149

Amount of Each Receipt this Period

28.86

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CLEMONS, WILLIAM, M., , JR.

Mailing Address 3021 Edgewood

City
AltonState
ILZip Code
62002FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
SEC THERAPY AIDE I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.86

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208150

Amount of Each Receipt this Period

28.86

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CLEVELAND, JAMES, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.207581

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

67.72

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 230 OF 1411
(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. CLEVELAND, JAMES, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	26	2018

Transaction ID : SA11AI.207791

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CLEVELAND-LEVERETTE, JANET, D., ,

Mailing Address 20058 Beechaven Street

City
SouthfieldState
MIZip Code
48076FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
ORGANIZER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1198.14

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206232

Amount of Each Receipt this Period

60.66

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CLEVELAND-LEVERETTE, JANET, D., ,

Mailing Address 20058 Beechaven Street

City
SouthfieldState
MIZip Code
48076FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
ORGANIZER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1258.80

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	15	2018

Transaction ID : SA11AI.206591

Amount of Each Receipt this Period

60.66

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

131.32

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

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CLEVENGER-MURPHY, STEPHANIE, K., ,

Mailing Address 3230 Rogstad Bend

City

Canal Winchester

State

OH

Zip Code

43110

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

INTERNAL AUDITOR II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208799

Amount of Each Receipt this Period

18.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CLEVENGER-MURPHY, STEPHANIE, K., ,

Mailing Address 3230 Rogstad Bend

City

Canal Winchester

State

OH

Zip Code

43110

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

INTERNAL AUDITOR II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

414.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209430

Amount of Each Receipt this Period

18.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CLEVENGER-MURPHY, STEPHANIE, K., ,

Mailing Address 3230 Rogstad Bend

City

Canal Winchester

State

OH

Zip Code

43110

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

INTERNAL AUDITOR II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

432.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210068

Amount of Each Receipt this Period

18.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

54.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 232 OF 1411

(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. CLONTZ, SHANE, R., ,

Mailing Address 3025 Shadwofax Drive

City
Springfield

State
IL

Zip Code
62707

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

INFORMATION SYSTEMS ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208151

Amount of Each Receipt this Period

25.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CLUNEY, JASMINE, L., ,

Mailing Address 1114 Birch Street

City
Crosby

State
MN

Zip Code
56441

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211648

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COAKLEY, KATHERINE, A., ,

Mailing Address 410 S. Maple Avenue
#604

City
Falls Church

State
VA

Zip Code
20046

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

AFFILIATE COMMUNICATION MANAG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1850.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206233

Amount of Each Receipt this Period

89.11

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

134.31

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 233 OF 1411

(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. COAKLEY, KATHERINE, A., ,

Mailing Address 410 S. Maple Avenue
#604

City
Falls Church

State
VA

Zip Code
20046

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

AFFILIATE COMMUNICATION MANAC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1939.39

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206592

Amount of Each Receipt this Period

89.11

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COBURN-PADEN, DAWN, L., ,

Mailing Address 6309 Vera Cruz Lane N

City

Brooklyn Park

State
MN

Zip Code
55429

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)

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
11 / 01 / 2018

Transaction ID : SA11AI.211649

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CODY, KATHRYN, A., ,

Mailing Address 166 Crest Avenue

City

Lancaster

State
PA

Zip Code
17602

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME PA CN 13/PASSHE

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.207009

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

139.11

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 234 OF 1411

(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. COEN, TROY, L., ,

Mailing Address 550 Front Street

City
PhiloState
OHZip Code
43771FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	6		2	0	1	8

Transaction ID : SA11AI.208800

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COEN, TROY, L., ,

Mailing Address 550 Front Street

City
PhiloState
OHZip Code
43771FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	9		2	0	1	8

Transaction ID : SA11AI.209431

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COEN, TROY, L., ,

Mailing Address 550 Front Street

City
PhiloState
OHZip Code
43771FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	3		2	0	1	8

Transaction ID : SA11AI.210069

Amount of Each Receipt this Period

10.50

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

31.50

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 235 OF 1411

(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. COFFMAN, GARRY, V., ,

Mailing Address P.O. Box 391194

City
Anza

State
CA

Zip Code
92539

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 3930

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211143

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COKER, FRED, W., ,

Mailing Address 134 Literal Road

City
Chehalis

State
WA

Zip Code
98532

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
10 / 25 / 2018

Transaction ID : SA11AI.207381

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COKER, FRED, W., ,

Mailing Address 134 Literal Road

City
Chehalis

State
WA

Zip Code
98532

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207582

Amount of Each Receipt this Period

10.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

46.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 236 OF 1411

(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. COKER, FRED, W., ,

Mailing Address 134 Literal Road

City
Chehalis

State
WA

Zip Code
98532

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF 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
11 / 26 / 2018

Transaction ID : SA11AI.207792

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COLBERT, TAMIKA, D., ,

Mailing Address 23951 Lake Shore Blvd.
Apt. 1507

City
Euclid

State
OH

Zip Code
44123

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210070

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COLCLASURE, KIMBERLY, D., ,

Mailing Address 4307 17th Avenue

City
Moline

State
IL

Zip Code
61265

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
HUMAN SRVC CASEWORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208152

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

49.00

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. COLEMAN, CRAIG, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 700 Broad Oak Drive City Trotwood State OH Zip Code 45426 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 ▼ 209.00			Date of Receipt M M / D D / Y Y Y Y Y 10 / 26 / 2018 Transaction ID : SA11AI.208802 Amount of Each Receipt this Period 9.50 ☐ Memo Item
B. COLEMAN, CRAIG, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 700 Broad Oak Drive City Trotwood State OH Zip Code 45426 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 ▼ 218.50			Date of Receipt M M / D D / Y Y Y Y Y 11 / 09 / 2018 Transaction ID : SA11AI.209433 Amount of Each Receipt this Period 9.50 ☐ Memo Item
C. COLEMAN, CRAIG, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 700 Broad Oak Drive City Trotwood State OH Zip Code 45426 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 ▼ 228.00			Date of Receipt M M / D D / Y Y Y Y Y 11 / 23 / 2018 Transaction ID : SA11AI.210071 Amount of Each Receipt this Period 9.50 ☐ Memo Item
SUBTOTAL of Receipts This Page (optional)..... ▶			28.50
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 238 OF 1411

(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. COLEMAN, MARSHELLE, L., ,

Mailing Address 8509 Bobolink Avenue

City
Cincinnati

State
OH

Zip Code
45231

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH CN 8/CINCINNATI CITY

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.210877

Amount of Each Receipt this Period

28.86

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COLEMAN, RANDALL, W., ,

Mailing Address 10344 Route 536

City

Punxsutawney

State

PA

Zip Code

15767

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.207010

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COLLAZO, RENE, , ,

Mailing Address 1212 Jefferson Street SE

City

Olympia

State

WA

Zip Code

98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 25 / 2018

Transaction ID : SA11AI.207382

Amount of Each Receipt this Period

10.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

69.36

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 239 OF 1411

(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. COLLAZO, RENE, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207583

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COLLAZO, RENE, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF 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
11 / 26 / 2018

Transaction ID : SA11AI.207793

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COLLEY, PHILLIP, L., ,

Mailing Address 1726 Deerfield Drive

City
Lima

State
OH

Zip Code
45805

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 SERGEANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210072

Amount of Each Receipt this Period

8.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

29.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 240 OF 1411

(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. COLLINS, CLARISSA, ., ,

Mailing Address 5607 Worcester Drive

City
Columbus

State
OH

Zip Code
43232

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HOUSING EXAMINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210073

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COLLINS, DANETTE, L., ,

Mailing Address 45-138 Waikalua Road
Apt. A

City
Kaneohe

State
HI

Zip Code
96744

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 152

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.210988

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COLLINS, SHARMAN, M., ,

Mailing Address 101 Wesley

City
Oak Park

State
IL

Zip Code
60302

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
CORRECTIONS OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208153

Amount of Each Receipt this Period

21.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

49.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 241 OF 1411

(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. COLLINS, WAYLON, T., ,

Mailing Address 9599 Cooley Road

City
AlbanyState
OHZip Code
45710FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M	D D	Y Y Y Y
10	26	2018

Transaction ID : SA11AI.208805

Amount of Each Receipt this Period

9.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COLLINS, WAYLON, T., ,

Mailing Address 9599 Cooley Road

City
AlbanyState
OHZip Code
45710FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.50

Date of Receipt

M M	D D	Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209436

Amount of Each Receipt this Period

9.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COLLINS, WAYLON, T., ,

Mailing Address 9599 Cooley Road

City
AlbanyState
OHZip Code
45710FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M	D D	Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210074

Amount of Each Receipt this Period

9.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

28.50

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 242 OF 1411

(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. COLTEN, JENNIFER, H., ,

Mailing Address 1830 Columbia Pike
#106

City
Arlington

State
VA

Zip Code
22204

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
RESEARCH ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206234

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COLTEN, JENNIFER, H., ,

Mailing Address 1830 Columbia Pike
#106

City
Arlington

State
VA

Zip Code
22204

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
RESEARCH ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206593

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COMERFORD, CARA, A., ,

Mailing Address 24214 80th Avenue N

City
Port byron

State
IL

Zip Code
61275

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
PUBLIC SVC ADMINISTRATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208154

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

70.00

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 243 OF 1411

(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. 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 ▼

1156.40

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206235

Amount of Each Receipt this Period

57.82

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. 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 ▼

1214.22

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206594

Amount of Each Receipt this Period

57.82

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CONAWAY, KATHLEEN, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)

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
10 / 25 / 2018

Transaction ID : SA11AI.207383

Amount of Each Receipt this Period

11.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

126.64

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 244 OF 1411

(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. CONAWAY, KATHLEEN, , ,

Mailing Address 1212 Jefferson Street SE

 City
 Olympia

 State
 WA

 Zip Code
 98501

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.207584

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CONAWAY, KATHLEEN, , ,

Mailing Address 1212 Jefferson Street SE

 City
 Olympia

 State
 WA

 Zip Code
 98501

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2018

Transaction ID : SA11AI.207794

Amount of Each Receipt this Period

☐ 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.

 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 ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2018

Transaction ID : SA11AI.208806

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 245 OF 1411

(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. 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 ▼

425.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209437

Amount of Each Receipt this Period

18.50

☐ 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 ▼

444.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210075

Amount of Each Receipt this Period

18.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CONKLIN, AMY, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 25 / 2018

Transaction ID : SA11AI.207384

Amount of Each Receipt this Period

17.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

54.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 246 OF 1411

(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. CONKLIN, AMY, , ,

Mailing Address 1212 Jefferson Street SE

 City
 Olympia

 State
 WA

 Zip Code
 98501

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.207585

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CONKLIN, AMY, , ,

Mailing Address 1212 Jefferson Street SE

 City
 Olympia

 State
 WA

 Zip Code
 98501

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.207795

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CONLEY, BRANDON, R., ,

Mailing Address 1015 Sullivan Road

 City
 Chillicothe

 State
 OH

 Zip Code
 45601

 FEC ID number of contributing
 federal political committee.

 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 ▼

Date of Receipt

 / /

Transaction ID : SA11AI.208807

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 247 OF 1411
(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. CONLEY, BRANDON, R., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 1015 Sullivan Road <table border="1"> <tr> <td>City Chillicothe</td> <td>State OH</td> <td>Zip Code 45601</td> </tr> </table> FEC ID number of contributing federal political committee. C			City Chillicothe	State OH	Zip Code 45601	Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>09</td> <td></td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.209438 Amount of Each Receipt this Period <table border="1"> <tr> <td>10.00</td> </tr> </table> ☐ Memo Item	M M M	/	D D D	/	Y Y Y Y Y Y	11		09		2018	10.00
City Chillicothe	State OH	Zip Code 45601															
M M M	/	D D D	/	Y Y Y Y Y Y													
11		09		2018													
10.00																	
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 ▼ <table border="1"> <tr> <td>230.00</td> </tr> </table>	230.00													
230.00																	
B. CONLEY, BRANDON, R., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 1015 Sullivan Road <table border="1"> <tr> <td>City Chillicothe</td> <td>State OH</td> <td>Zip Code 45601</td> </tr> </table> FEC ID number of contributing federal political committee. C			City Chillicothe	State OH	Zip Code 45601	Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>23</td> <td></td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.210076 Amount of Each Receipt this Period <table border="1"> <tr> <td>10.00</td> </tr> </table> ☐ Memo Item	M M M	/	D D D	/	Y Y Y Y Y Y	11		23		2018	10.00
City Chillicothe	State OH	Zip Code 45601															
M M M	/	D D D	/	Y Y Y Y Y Y													
11		23		2018													
10.00																	
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 ▼ <table border="1"> <tr> <td>240.00</td> </tr> </table>	240.00													
240.00																	
C. CONLEY, ERIN, L., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address P.O. Box 12 <table border="1"> <tr> <td>City Winchester</td> <td>State OH</td> <td>Zip Code 45697</td> </tr> </table> FEC ID number of contributing federal political committee. C			City Winchester	State OH	Zip Code 45697	Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>26</td> <td></td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.208808 Amount of Each Receipt this Period <table border="1"> <tr> <td>10.00</td> </tr> </table> ☐ Memo Item	M M M	/	D D D	/	Y Y Y Y Y Y	10		26		2018	10.00
City Winchester	State OH	Zip Code 45697															
M M M	/	D D D	/	Y Y Y Y Y Y													
10		26		2018													
10.00																	
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH Occupation (for Individual) HOSPITAL AIDE Receipt For: ☐ Primary ☐ General ☐ Other (specify)			Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>220.00</td> </tr> </table>	220.00													
220.00																	
SUBTOTAL of Receipts This Page (optional)..... ▶			<table border="1"> <tr> <td>30.00</td> </tr> </table>	30.00													
30.00																	
TOTAL This Period (last page this line number only)..... ▶			<table border="1"> <tr> <td></td> </tr> </table>														

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 248 OF 1411

(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. CONLEY, ERIN, L., ,

Mailing Address P.O. Box 12

City
Winchester

State
OH

Zip Code
45697

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HOSPITAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209439

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CONLEY, ERIN, L., ,

Mailing Address P.O. Box 12

City
Winchester

State
OH

Zip Code
45697

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HOSPITAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210077

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CONLEY, LISA, G., ,

Mailing Address 5723 Benzler Road

City
Prospect

State
OH

Zip Code
43342

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 ▼

220.00

Date of Receipt

10 / 26 / 2018

Transaction ID : SA11AI.208809

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CONLEY, LISA, G., ,

Mailing Address 5723 Benzler Road

City
ProspectState
OHZip Code
43342FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209440

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CONLEY, LISA, G., ,

Mailing Address 5723 Benzler Road

City
ProspectState
OHZip Code
43342FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210078

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CONNELLY, THOMAS, R., ,

Mailing Address 1364 Clinton Street

City
NilesState
OHZip Code
44446FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

530.50

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	23	2018

Transaction ID : SA11AI.210788

Amount of Each Receipt this Period

19.23

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

39.23

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CONNELLY, THOMAS, R., ,

Mailing Address 1364 Clinton Street

City
NilesState
OHZip Code
44446FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.73

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.210789

Amount of Each Receipt this Period

19.23

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CONNELLY, THOMAS, R., ,

Mailing Address 1364 Clinton Street

City
NilesState
OHZip Code
44446FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

559.23

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	06	2018

Transaction ID : SA11AI.210855

Amount of Each Receipt this Period

9.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CONNELLY, THOMAS, R., ,

Mailing Address 1364 Clinton Street

City
NilesState
OHZip Code
44446FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

578.46

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	13	2018

Transaction ID : SA11AI.210790

Amount of Each Receipt this Period

19.23

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

47.96

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

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CONNELLY, THOMAS, R., ,

Mailing Address 1364 Clinton Street

City
Niles

State
OH

Zip Code
44446

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

597.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.210878

Amount of Each Receipt this Period

19.23

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CONTEE, BEVERLY, S., ,

Mailing Address 12061 Beltsville Drive

City
Beltsville

State
MD

Zip Code
20705

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
LEGAL ASSISTANT II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

611.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206236

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CONTEE, BEVERLY, S., ,

Mailing Address 12061 Beltsville Drive

City
Beltsville

State
MD

Zip Code
20705

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
LEGAL ASSISTANT II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

636.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206595

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

69.23

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CONTEE, KEVIN, , ,

Mailing Address 2521 Southern Avenue
Apt. 101

City
Temple Hills

State
MD

Zip Code
20748

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
EXECUTIVE OPERATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

681.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206237

Amount of Each Receipt this Period

34.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CONTEE, KEVIN, , ,

Mailing Address 2521 Southern Avenue
Apt. 101

City
Temple Hills

State
MD

Zip Code
20748

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
EXECUTIVE OPERATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

716.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206596

Amount of Each Receipt this Period

34.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CONTI, THOMAS, M., ,

Mailing Address 13825 Regal Court

City
Woodbridge

State
VA

Zip Code
22193

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
FIELD AUDITOR III

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1074.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206238

Amount of Each Receipt this Period

53.05

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

121.65

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CONTI, THOMAS, M., ,

Mailing Address 13825 Regal Court

City
Woodbridge

State
VA

Zip Code
22193

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
FIELD AUDITOR III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1127.69

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206597

Amount of Each Receipt this Period

53.05

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COOLEY, AMBER, S., ,

Mailing Address 414 Forest Lane

City
Ridgeland

State
MS

Zip Code
39157

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ORGANIZER IN TRAINING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

422.11

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206239

Amount of Each Receipt this Period

21.45

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COOLEY, AMBER, S., ,

Mailing Address 414 Forest Lane

City
Ridgeland

State
MS

Zip Code
39157

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ORGANIZER IN TRAINING

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

446.12

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206598

Amount of Each Receipt this Period

24.01

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

98.51

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
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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. COOPER, CARLOS, D., ,

Mailing Address 328 Gay Street NE

City
Massillion

State
OH

Zip Code
44646

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
JUVENILE CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210079

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COOPER, CHAELECIA, , ,

Mailing Address 10126 S Hoxie Avenue

City
Chiacgo

State
IL

Zip Code
60617

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
SPACE ADMINISTRATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.40

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208155

Amount of Each Receipt this Period

20.84

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COOPER, DARNEICE, , ,

Mailing Address 5602 W Sutton Place
Unit B

City
Monee

State
IL

Zip Code
60449

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
HUMAN SERVICES REPRESENTATIV

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1100.07

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208156

Amount of Each Receipt this Period

83.34

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

112.68

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. COOPER, KRYSTAL, , ,

Mailing Address 5583 Trent Court
Apt. 210

City
Alexandria

State
VA

Zip Code
22311

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ASSISTANT/RECEPTIONIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

614.39

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206240

Amount of Each Receipt this Period

28.31

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COOPER, KRYSTAL, , ,

Mailing Address 5583 Trent Court
Apt. 210

City
Alexandria

State
VA

Zip Code
22311

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ASSISTANT/RECEPTIONIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

642.70

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206599

Amount of Each Receipt this Period

28.31

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COOPER, PATRICIA, L., ,

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 (for Individual)
AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

202.02

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 18 / 2018

Transaction ID : SA11AI.211832

Amount of Each Receipt this Period

9.62

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

66.24

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. COOPER, PATRICIA, L., ,

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 (for Individual)
AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.211891

Amount of Each Receipt this Period

9.62

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COOPER, RANDY, D., ,

Mailing Address 1325 Bennett School House Road
Unit C

City
Wheelersburg

State
OH

Zip Code
45694

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 ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209442

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COOPER, RANDY, D., ,

Mailing Address 1325 Bennett School House Road
Unit C

City
Wheelersburg

State
OH

Zip Code
45694

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 ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210080

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

27.62

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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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. COPPOLA, VALERIE, J., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 142 Mayor Estate Drive City Cambridge State OH Zip Code 43725 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH Occupation (for Individual) THERAPUTIC PROGRAM TECHNICIA Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 207.00			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 09 / 2018 Transaction ID : SA11AI.209443 Amount of Each Receipt this Period 9.00 ☐ Memo Item
B. COPPOLA, VALERIE, J., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 142 Mayor Estate Drive City Cambridge State OH Zip Code 43725 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH Occupation (for Individual) THERAPUTIC PROGRAM TECHNICIA Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 216.00			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 23 / 2018 Transaction ID : SA11AI.210081 Amount of Each Receipt this Period 9.00 ☐ Memo Item
C. COREY, MAL, J., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 3416 Frankfort Clarksburg Pike City Frankfort State OH Zip Code 45628 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 ▼ 288.00			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 06 / 2018 Transaction ID : SA11AI.210082 Amount of Each Receipt this Period 24.00 ☐ Memo Item
SUBTOTAL of Receipts This Page (optional)..... ▶			42.00
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 258 OF 1411

(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. CORISH, KENNETH, T., , JR.

Mailing Address 254 South 20th Street

City
Harrisburg

State
PA

Zip Code
17104

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.207011

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COSTILLA, AMANDA, L., ,

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 (for Individual)
AFSCME MN CN 5/ST. PAUL P.S.

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 24 / 2018

Transaction ID : SA11AI.211615

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COSTILLA, AMANDA, L., ,

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 (for Individual)
AFSCME MN CN 5/ST. PAUL P.S.

Occupation (for Individual)
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
10 / 31 / 2018

Transaction ID : SA11AI.211616

Amount of Each Receipt this Period

11.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

62.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 259 OF 1411

(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. COSTILLA, AMANDA, L., ,

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 (for Individual)

AFSCME MN CN 5/ST. PAUL P.S.

Occupation (for Individual)

STAFF 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 Y
11 / 14 / 2018

Transaction ID : SA11AI.211650

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COTTON, DONNA, M., ,

Mailing Address 2228 Willamont Avenue

City

Columbus

State

OH

Zip Code

43219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

CUSTOMER SERVICES ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208813

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COTTON, DONNA, M., ,

Mailing Address 2228 Willamont Avenue

City

Columbus

State

OH

Zip Code

43219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

CUSTOMER SERVICES ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209444

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

31.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. COTTON, DONNA, M., ,

Mailing Address 2228 Willamont Avenue

City
ColumbusState
OHZip Code
43219FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CUSTOMER SERVICES ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210083

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COTTON, MARY, E., ,

Mailing Address 1060 Wildwood Avenue

City
ColumbusState
OHZip Code
43219FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210084

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COTTRELL, EUGENIA, A., ,

Mailing Address 3929 Elite Street

City
BowieState
MDZip Code
20716FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
HUMAN RESOURCES ASSISTANT II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

383.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206241

Amount of Each Receipt this Period

35.75

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

54.25

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. COTTRELL, EUGENIA, A., ,

Mailing Address 3929 Elite Street

City
BowieState
MDZip Code
20716FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

HUMAN RESOURCES ASSISTANT II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

418.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2018

Transaction ID : SA11AI.206600

Amount of Each Receipt this Period

35.75

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COUFAL, BARBARA, , ,

Mailing Address 10112 Parkwood Drive

City
BethesdaState
MDZip Code
20814FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L/STATE STREET

Occupation (for Individual)

RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1011.66

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2018

Transaction ID : SA11AI.206601

Amount of Each Receipt this Period

86.71

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COVENTRY, BONNIE, J., ,Mailing Address 902 E Gambier Street
Apt. 1City
Mount VernonState
OHZip Code
43050FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

THERAPUTIC PROGRAM TECHNICIAI

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2018

Transaction ID : SA11AI.208815

Amount of Each Receipt this Period

14.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

136.46

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 262 OF 1411

(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. COVENTRY, BONNIE, J., ,

Mailing Address 902 E Gambier Street
Apt. 1

City

Mount Vernon

State

OH

Zip Code

43050

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

322.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209446

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COVENTRY, BONNIE, J., ,

Mailing Address 902 E Gambier Street
Apt. 1

City

Mount Vernon

State

OH

Zip Code

43050

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210085

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COWDREY, MARY, E., ,

Mailing Address 202 N. 3rd Street

City

Marshalltown

State

IA

Zip Code

50158

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2018

Transaction ID : SA11AI.211833

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

48.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. COWDREY, MARY, E., ,

Mailing Address 202 N. 3rd Street

City
MarshalltownState
IAZip Code
50158FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/STATE OF IAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.211892

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COX, CHARI, M., ,

Mailing Address 4031 Executive Park Drive

City
HarrisburgState
PAZip Code
17111FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/NSP/LOCAL 2902COccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	08	2018

Transaction ID : SA11AI.207012

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COX, DAVID, M., ,

Mailing Address 2060 Teske Road

City
MarionState
ILZip Code
62959FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
ORGANIZER IN TRAINING

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

772.70

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206243

Amount of Each Receipt this Period

36.71

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

66.71

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. COX, DAVID, M., ,

Mailing Address 2060 Teske Road

City
MarionState
ILZip Code
62959FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
ORGANIZER IN TRAINING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

809.41

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2018			

Transaction ID : SA11AI.206603

Amount of Each Receipt this Period

36.71

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COX, DEBORA, F., ,

Mailing Address 10735 Willfleet Drive

City
CincinnatiState
OHZip Code
45241FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
WORKERS COMP REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2018			

Transaction ID : SA11AI.208816

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COX, DEBORA, F., ,

Mailing Address 10735 Willfleet Drive

City
CincinnatiState
OHZip Code
45241FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
WORKERS COMP REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			09			2018			

Transaction ID : SA11AI.209447

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

56.71

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 265 OF 1411

(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. COX, DEBORA, F., ,

Mailing Address 10735 Willfleet Drive

City
CincinnatiState
OHZip Code
45241FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
WORKERS COMP REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210086

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COX, JOSEPH, , ,Mailing Address 190 W. Ostend Street
Suite 101City
BaltimoreState
MDZip Code
21230FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MD CN 3Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2018

Transaction ID : SA11AI.211314

Amount of Each Receipt this Period

62.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CRAGGS, ABIGAIL, E., ,

Mailing Address 410 W 2nd

City
TaylorvilleState
ILZip Code
62568FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
DISABILITY CLAIMS ADJUDICATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

Transaction ID : SA11AI.208157

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

102.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 266 OF 1411

(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. CRAIG, ALICIA, M., ,

Mailing Address 181 Sunnyside Avenue

City
New CastleState
PAZip Code
16102FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/NSP/LOCAL 2902Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	18	2018

Transaction ID : SA11AI.207198

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CRAIG, ALICIA, M., ,

Mailing Address 181 Sunnyside Avenue

City
New CastleState
PAZip Code
16102FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/NSP/LOCAL 2902Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	08	2018

Transaction ID : SA11AI.207013

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CRANDALL, BARBARA, , ,

Mailing Address 522 23rd Avenue

City
MolineState
ILZip Code
61265FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
PUBLIC SVC ADMINISTRATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208158

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

170.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CREIGLOW, JEANENE, R., ,

Mailing Address 1687 Gypsy Lane

City
ColumbusState
OHZip Code
43229FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
MAINTENANCE REPAIR TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.50

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209448

Amount of Each Receipt this Period

12.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CREIGLOW, JEANENE, R., ,

Mailing Address 1687 Gypsy Lane

City
ColumbusState
OHZip Code
43229FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
MAINTENANCE REPAIR TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210087

Amount of Each Receipt this Period

12.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CRESSSLIFE, JENNIFER, L., ,

Mailing Address 3493 Alice Road

City
ToddvilleState
IAZip Code
52341FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/STATE OF IAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	18	2018

Transaction ID : SA11AI.211834

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

35.00

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 268 OF 1411

(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. CRESSSLIFE, JENNIFER, L., ,

Mailing Address 3493 Alice Road

City

Toddville

State

IA

Zip Code

52341

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

10 / 26 / 2018

Transaction ID : SA11AI.211893

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CRISP, KEMIE, P., ,

Mailing Address 1613 E Capitol Avenue

City

Springfield

State

IL

Zip Code

62703

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 SUPPORT SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

472.38

Date of Receipt

11 / 05 / 2018

Transaction ID : SA11AI.208159

Amount of Each Receipt this Period

94.38

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CROCKETT, JEWELYN, K., ,

Mailing Address P.O. Box 443

City

Warren

State

OH

Zip Code

44482

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

WORKERS COMPENSATION CLAIMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

10 / 26 / 2018

Transaction ID : SA11AI.208818

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

114.38

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CROCKETT, JEWELYN, K., ,

Mailing Address P.O. Box 443

City
WarrenState
OHZip Code
44482FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
WORKERS COMPENSATION CLAIMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M	D D	Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209449

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CROCKETT, JEWELYN, K., ,

Mailing Address P.O. Box 443

City
WarrenState
OHZip Code
44482FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
WORKERS COMPENSATION CLAIMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M	D D	Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210088

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CROSS, CARLOS, , ,

Mailing Address 1034 N. Washington Avenue

City
LansingState
MIZip Code
48906FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MI CN 25Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

635.60

Date of Receipt

M M	D D	Y Y Y Y
11	07	2018

Transaction ID : SA11AI.211336

Amount of Each Receipt this Period

30.70

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

50.70

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. **CROSS, CARLOS, , ,**

Mailing Address 1034 N. Washington Avenue

City
Lansing

State
MI

Zip Code
48906

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MI CN 25

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.30

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 20 / 2018

Transaction ID : SA11AI.211382

Amount of Each Receipt this Period

30.70

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **CROWE, REBECCA, , ,**

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 25 / 2018

Transaction ID : SA11AI.207385

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **CROWE, REBECCA, , ,**

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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 Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207586

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.70

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CROWE, REBECCA, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207796

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CROZIER, WILLIAM, R., ,

Mailing Address 233 Overbrook Road

City
Valencia

State
PA

Zip Code
16059

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)
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
10 / 31 / 2018

Transaction ID : SA11AI.207014

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CRUMP, MELINDA, , ,

Mailing Address 1901 South Jackson

City
North Chicago

State
IL

Zip Code
60064

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
EXECUTIVE SECRETARY I

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

218.82

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208160

Amount of Each Receipt this Period

31.26

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

71.26

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CRUMP, TANISHA, N ., ,

Mailing Address 1303 Hideaway Woods Drive
Apt. A

City
Westerville

State
OH

Zip Code
43081

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
DISABILITY CLAIMS ADJUSTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208819

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CRUMP, TANISHA, N ., ,

Mailing Address 1303 Hideaway Woods Drive
Apt. A

City
Westerville

State
OH

Zip Code
43081

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
DISABILITY CLAIMS ADJUSTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209450

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CRUMP, TANISHA, N ., ,

Mailing Address 1303 Hideaway Woods Drive
Apt. A

City
Westerville

State
OH

Zip Code
43081

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
DISABILITY CLAIMS ADJUSTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210089

Amount of Each Receipt this Period

11.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

33.00

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CRUTCHER, BELINDA, A., ,

Mailing Address 1849 Edgewood Drive

 City
 Lima

 State
 OH

 Zip Code
 45805

 FEC ID number of contributing
 federal political committee.

 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 ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.209451

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CRUTCHER, BELINDA, A., ,

Mailing Address 1849 Edgewood Drive

 City
 Lima

 State
 OH

 Zip Code
 45805

 FEC ID number of contributing
 federal political committee.

 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 ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210090

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CULLEN, JAMES, B., ,

 Mailing Address 126 Central Square
 Apt. 1

 City
 Pittsburgh

 State
 PA

 Zip Code
 15228

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME INT'L

 Occupation (for Individual)
 ASSISTANT TO REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2018

Transaction ID : SA11AI.206244

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CULLEN, JAMES, B., ,

Mailing Address 126 Central Square
Apt. 1

City
Pittsburgh

State
PA

Zip Code
15228

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ASSISTANT TO REGIONAL DIRECTO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1414.22

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206604

Amount of Each Receipt this Period

57.82

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CUMMINS, GLENDA, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
10 / 25 / 2018

Transaction ID : SA11AI.207386

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CUMMINS, GLENDA, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207587

Amount of Each Receipt this Period

10.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

78.82

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CUMMINS, GLENDA, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	26	2018

Transaction ID : SA11AI.207797

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CUNNINGHAM, ERIKA, , ,Mailing Address 80 Swan Way
Suite 110City
OaklandState
CAZip Code
94621FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA CN 57Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.40

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	07	2018

Transaction ID : SA11AI.211226

Amount of Each Receipt this Period

16.70

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CUNNINGHAM, JOLANDA, , ,

Mailing Address 4709 Janis Drive

City
ColumbusState
OHZip Code
43227FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
SENIOR FINANCIAL ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210091

Amount of Each Receipt this Period

8.50

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

35.70

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 276 OF 1411

(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. CURRY, ALPH, L., ,

Mailing Address 1008 Greenob Drive

City
Englewood

State
OH

Zip Code
45322

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 ▼

319.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208822

Amount of Each Receipt this Period

14.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CURRY, ALPH, L., ,

Mailing Address 1008 Greenob Drive

City
Englewood

State
OH

Zip Code
45322

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 ▼

333.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209453

Amount of Each Receipt this Period

14.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CURRY, ALPH, L., ,

Mailing Address 1008 Greenob Drive

City
Englewood

State
OH

Zip Code
45322

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 ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210092

Amount of Each Receipt this Period

14.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

43.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 277 OF 1411

(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. CURRY, MICHAEL, S., ,

Mailing Address 2979 Tracer Road

City
Columbus

State
OH

Zip Code
43232

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
PROGRAMMER ANALYST II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208823

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CURRY, MICHAEL, S., ,

Mailing Address 2979 Tracer Road

City
Columbus

State
OH

Zip Code
43232

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
PROGRAMMER ANALYST II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209454

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CURRY, MICHAEL, S., ,

Mailing Address 2979 Tracer Road

City
Columbus

State
OH

Zip Code
43232

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
PROGRAMMER ANALYST II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210093

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 278 OF 1411

(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. CURTIS, REGINA, D., ,Mailing Address 5306 Gatehouse Drive
Apt. CCity
ColumbusState
OHZip Code
43213FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
RECORDS MANAGEMENT REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.208824

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CURTIS, REGINA, D., ,Mailing Address 5306 Gatehouse Drive
Apt. CCity
ColumbusState
OHZip Code
43213FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
RECORDS MANAGEMENT REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.50

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209455

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CURTIS, REGINA, D., ,Mailing Address 5306 Gatehouse Drive
Apt. CCity
ColumbusState
OHZip Code
43213FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
RECORDS MANAGEMENT REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210094

Amount of Each Receipt this Period

10.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

31.50

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 279 OF 1411

(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. DAHLKE, CHRIS, , ,

Mailing Address 1658 Royal Vista Drive

City
Ramona

State
CA

Zip Code
92065

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 3930

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211144

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DALAPO, HOLLIE, K., ,

Mailing Address P.O. Box 2154

City
Wailuku

State
HI

Zip Code
96793

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 152

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.210989

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DALEY, SEAN, , ,

Mailing Address 1014 6th Avenue

City
Grafton

State
WI

Zip Code
53024

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WI CN 24

Occupation (for Individual)
FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 16 / 2018

Transaction ID : SA11AI.211435

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

65.00

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 280 OF 1411

(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. DALY, COLLEEN, M., ,

Mailing Address 9170 Cahill Avenue
Apt. 318

City
Inver Grove Hght

State
MN

Zip Code
55076

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211651

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DANDO, WILLIAM, , ,

Mailing Address 6630 Huntingdon Street

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)
ASSOCIATE LEGISLATIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1222.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207015

Amount of Each Receipt this Period

106.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DANGER, TIMOTHY, S., ,

Mailing Address 1609 Doddridge Avenue

City
Cloquet

State
MN

Zip Code
55720

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

306.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211652

Amount of Each Receipt this Period

40.80

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

167.10

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

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DANIELS, ANDREW, J., ,

Mailing Address 2337 Suffolk Lane

City

Grove City

State

OH

Zip Code

43123

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 ▼

418.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208825

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DANIELS, ANDREW, J., ,

Mailing Address 2337 Suffolk Lane

City

Grove City

State

OH

Zip Code

43123

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 ▼

437.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209456

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DANIELS, ANDREW, J., ,

Mailing Address 2337 Suffolk Lane

City

Grove City

State

OH

Zip Code

43123

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 ▼

456.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210095

Amount of Each Receipt this Period

19.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

57.00

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 282 OF 1411

(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. DANIELS, RHONDA, C ., , Mailing Address 3420 Retriever Road <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">City Columbus</td> <td style="width: 16%;">State OH</td> <td style="width: 51%;">Zip Code 43232</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH</td> <td style="width: 67%;">Occupation (for Individual) INSURANCE LICENSING REP</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 207.00			City Columbus	State OH	Zip Code 43232	Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) INSURANCE LICENSING REP	Date of Receipt M M / D D / Y Y Y Y Y 11 / 09 / 2018 Transaction ID : SA11AI.209457 Amount of Each Receipt this Period 9.00 ☐ Memo Item	
City Columbus	State OH	Zip Code 43232							
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) INSURANCE LICENSING REP								
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. DANIELS, RHONDA, C ., , Mailing Address 3420 Retriever Road <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">City Columbus</td> <td style="width: 16%;">State OH</td> <td style="width: 51%;">Zip Code 43232</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH</td> <td style="width: 67%;">Occupation (for Individual) INSURANCE LICENSING REP</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 216.00			City Columbus	State OH	Zip Code 43232	Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) INSURANCE LICENSING REP	Date of Receipt M M / D D / Y Y Y Y Y 11 / 23 / 2018 Transaction ID : SA11AI.210096 Amount of Each Receipt this Period 9.00 ☐ Memo Item	
City Columbus	State OH	Zip Code 43232							
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) INSURANCE LICENSING REP								
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. DANIELSON, LINDA, , , Mailing Address 2132 E Dayton Street <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">City Madison</td> <td style="width: 16%;">State WI</td> <td style="width: 51%;">Zip Code 53704</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">Name of Employer (for Individual) AFSCME WI CN 32/DANE COUNTY</td> <td style="width: 67%;">Occupation (for Individual) STAFF REPRESENTATIVE</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) Aggregate Year-to-Date ▼ 220.00			City Madison	State WI	Zip Code 53704	Name of Employer (for Individual) AFSCME WI CN 32/DANE COUNTY	Occupation (for Individual) STAFF REPRESENTATIVE	Date of Receipt M M / D D / Y Y Y Y Y 10 / 24 / 2018 Transaction ID : SA11AI.211414 Amount of Each Receipt this Period 10.00 ☐ Memo Item	
City Madison	State WI	Zip Code 53704							
Name of Employer (for Individual) AFSCME WI CN 32/DANE COUNTY	Occupation (for Individual) STAFF REPRESENTATIVE								
SUBTOTAL of Receipts This Page (optional)..... ▶			28.00						
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 283 OF 1411

(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. DANIELSON, LINDA, , ,

Mailing Address 2132 E Dayton Street

City
Madison

State
WI

Zip Code
53704

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WI CN 32/DANE COUNTY

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

11 / 01 / 2018

Transaction ID : SA11AI.211415

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DANIELSON, LINDA, , ,

Mailing Address 2132 E Dayton Street

City
Madison

State
WI

Zip Code
53704

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WI CN 32/DANE COUNTY

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 16 / 2018

Transaction ID : SA11AI.211436

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DANIELSON, SAMANTHA, , ,

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 ▼

618.06

Date of Receipt

11 / 08 / 2018

Transaction ID : SA11AI.207016

Amount of Each Receipt this Period

57.52

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

77.52

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DANISON, MARGARET, A, ,

Mailing Address 5 Heritage Place

City
Ballston Spa

State
NY

Zip Code
12020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
FIELD OFFICE ASSISTANT II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206246

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DANISON, MARGARET, A, ,

Mailing Address 5 Heritage Place

City
Ballston Spa

State
NY

Zip Code
12020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
FIELD OFFICE ASSISTANT II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206607

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DANNEN, JAMES, D., ,

Mailing Address 12747 Renton Avenue S

City
Seattle

State
WA

Zip Code
98178

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28

Occupation (for Individual)
COUNCIL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

462.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2018

Transaction ID : SA11AI.207798

Amount of Each Receipt this Period

42.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

102.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 285 OF 1411

(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. DANNEN, SEAN, , ,

Mailing Address P.O. Box 7472

City
TacomaState
WAZip Code
98417FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28Occupation (for Individual)
COUNCIL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

484.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	14	/	2018

Transaction ID : SA11AI.207799

Amount of Each Receipt this Period

44.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DANTZLER-BEY, RAYNA, S., ,

Mailing Address 3447 Jmes Avenue N

City
MinneapolisState
MNZip Code
55412FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MNOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2018

Transaction ID : SA11AI.211653

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DANVERS, DARYL, L., ,

Mailing Address 5323 Davie Street

City
DavenportState
IAZip Code
52806FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
PUBLIC SVC ADMINISTRATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

Transaction ID : SA11AI.208161

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

94.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 286 OF 1411

(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. DAOUD, TAWFIK, Y., ,

Mailing Address 13304 Clifton Park Circle

City
Clifton

State
VA

Zip Code
20124

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

OPERATION SUPPORT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1086.40

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206247

Amount of Each Receipt this Period

53.32

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DAOUD, TAWFIK, Y., ,

Mailing Address 13304 Clifton Park Circle

City
Clifton

State
VA

Zip Code
20124

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

OPERATION SUPPORT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1139.72

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206608

Amount of Each Receipt this Period

53.32

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DARDEN, MARZINE, A., ,

Mailing Address 1414 APJones Street

City
Cincinnati

State
OH

Zip Code
45223

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH CN 8/CINCINNATI CSD

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

202.47

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 22 / 2018

Transaction ID : SA11AI.210791

Amount of Each Receipt this Period

11.91

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

118.55

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DARDEN, MARZINE, A., ,

Mailing Address 1414 APJones Street

City
Cincinnati

State
OH

Zip Code
45223

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/CINCINNATI CSD

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.38

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.210792

Amount of Each Receipt this Period

11.91

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DARDEN, MARZINE, A., ,

Mailing Address 1414 APJones Street

City
Cincinnati

State
OH

Zip Code
45223

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/CINCINNATI CSD

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.29

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 20 / 2018

Transaction ID : SA11AI.210793

Amount of Each Receipt this Period

11.91

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DARDEN, MARZINE, A., ,

Mailing Address 1414 APJones Street

City
Cincinnati

State
OH

Zip Code
45223

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/CINCINNATI CSD

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

238.20

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.210879

Amount of Each Receipt this Period

11.91

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

35.73

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 288 OF 1411

(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. DARNELL, STEPHANIE, A., ,

Mailing Address 504 E Washington Street

City
Ashland

State
IL

Zip Code
62612

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
REIMBURSEMENT OFFICE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208162

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DARST, JOSH, T., ,

Mailing Address 9013 Bloomington Avenue

City
Bloomington

State
MN

Zip Code
55425

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
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
11 / 01 / 2018

Transaction ID : SA11AI.211654

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DAVANZO, KIMBERLY, A., ,

Mailing Address 4901 New Castle Road

City
Lowellville

State
OH

Zip Code
44436

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 ▼

912.56

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207017

Amount of Each Receipt this Period

82.96

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

154.96

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 289 OF 1411

(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. DAVENHALL, MATTHEW, P., ,Mailing Address 7305 213th Place SW
Apt. 104City
EdmondsState
WAZip Code
98026FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/COMM COLLEGEOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	25	2018

Transaction ID : SA11AI.207387

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DAVENHALL, MATTHEW, P., ,Mailing Address 7305 213th Place SW
Apt. 104City
EdmondsState
WAZip Code
98026FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/COMM COLLEGEOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.207588

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DAVENHALL, MATTHEW, P., ,Mailing Address 7305 213th Place SW
Apt. 104City
EdmondsState
WAZip Code
98026FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/COMM COLLEGEOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	26	2018

Transaction ID : SA11AI.207800

Amount of Each Receipt this Period

12.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

36.00

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DAVIES, SARA, , ,

Mailing Address P.O. Box 453

City

Factoryville

State

PA

Zip Code

18419

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 ▼

579.48

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207018

Amount of Each Receipt this Period

52.68

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DAVIS, ABIGAIL, K., ,

Mailing Address 1806 West Rice Street
Apt. 2N

City

Chicago

State

IL

Zip Code

60622

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31

Occupation (for Individual)

ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

942.02

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208163

Amount of Each Receipt this Period

94.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DAVIS, ARDITH, M., ,

Mailing Address 542 Valley View Road

City

Mansfield

State

OH

Zip Code

44905

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

WORKERS COMPENSATION CLAIMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208827

Amount of Each Receipt this Period

14.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

161.38

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
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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. DAVIS, ARDITH, M., ,

Mailing Address 542 Valley View Road

City
Mansfield

State
OH

Zip Code
44905

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
WORKERS COMPENSATION CLAIMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209458

Amount of Each Receipt this Period

14.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DAVIS, ARDITH, M., ,

Mailing Address 542 Valley View Road

City
Mansfield

State
OH

Zip Code
44905

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
WORKERS COMPENSATION CLAIMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210097

Amount of Each Receipt this Period

14.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DAVIS, DEBORAH, L., ,

Mailing Address 1989 Hult Road

City
Mansfield

State
OH

Zip Code
44903

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 ▼

352.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208828

Amount of Each Receipt this Period

16.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DAVIS, DEBORAH, L., ,

Mailing Address 1989 Hulit Road

City
Mansfield

State
OH

Zip Code
44903

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 ▼

368.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209459

Amount of Each Receipt this Period

16.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DAVIS, DEBORAH, L., ,

Mailing Address 1989 Hulit Road

City
Mansfield

State
OH

Zip Code
44903

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 ▼

384.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210098

Amount of Each Receipt this Period

16.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DAVIS, ELDRID, L., ,

Mailing Address 1547 Garywood Avenue

City
Columbus

State
OH

Zip Code
43227

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
MOVER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

231.00

Date of Receipt

10 / 26 / 2018

Transaction ID : SA11AI.208829

Amount of Each Receipt this Period

10.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

42.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DAVIS, ELDRID, L., ,

Mailing Address 1547 Garywood Avenue

City
Columbus

State
OH

Zip Code
43227

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
MOVER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209460

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DAVIS, ELDRID, L., ,

Mailing Address 1547 Garywood Avenue

City
Columbus

State
OH

Zip Code
43227

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
MOVER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210099

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DAVIS, EUGENE, A., ,

Mailing Address P.O. Box 1554

City
Marion

State
OH

Zip Code
43301

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 ▼

319.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208830

Amount of Each Receipt this Period

14.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

35.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DAVIS, EUGENE, A., ,

Mailing Address P.O. Box 1554

City
MarionState
OHZip Code
43301FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.50

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209461

Amount of Each Receipt this Period

14.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DAVIS, EUGENE, A., ,

Mailing Address P.O. Box 1554

City
MarionState
OHZip Code
43301FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210100

Amount of Each Receipt this Period

14.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DAVIS, GREGORY, N., ,

Mailing Address 53737 Heineman Road E.

City
EdwallState
WAZip Code
99008FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28Occupation (for Individual)
COUNCIL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.207802

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

49.00

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DAVIS, GREGORY, N., ,

Mailing Address 53737 Heineman Road E.

City
Edwall

State
WA

Zip Code
99008

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28

Occupation (for Individual)

COUNCIL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

620.00

Date of Receipt

11 / 14 / 2018

Transaction ID : SA11AI.207801

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DAVIS, JAMES, V., ,

Mailing Address 2913 Rend Drive

City
Springfield

State
IL

Zip Code
62707

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

CORRECTIONS OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 05 / 2018

Transaction ID : SA11AI.208164

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DAVIS, MALINDA, S., ,

Mailing Address 6515 Strecker Road

City
Monroeville

State
OH

Zip Code
44847

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

HOSPITAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

528.00

Date of Receipt

10 / 26 / 2018

Transaction ID : SA11AI.208831

Amount of Each Receipt this Period

24.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.00

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DAVIS, MALINDA, S., ,

Mailing Address 6515 Strecker Road

 City
 Monroeville

 State
 OH

 Zip Code
 44847

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 HOSPITAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	D D	Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209462

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DAVIS, MALINDA, S., ,

Mailing Address 6515 Strecker Road

 City
 Monroeville

 State
 OH

 Zip Code
 44847

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 HOSPITAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	D D	Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210101

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DAVIS, MARK, R., ,

Mailing Address 14724 Armin Avenue

 City
 Lakewood

 State
 OH

 Zip Code
 44107

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH CN 8

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	D D	Y Y Y Y
11	06	2018

Transaction ID : SA11AI.210880

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 297 OF 1411
(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. DAVIS, PATRICIA, D., ,

Mailing Address 2915 Guilford Street

City
PhiladelphiaState
PAZip Code
19152FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.207019

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DAVIS, ROBERT, A., ,

Mailing Address 822 Bovee Lane

City
PowellState
OHZip Code
43065FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8Occupation (for Individual)
ASSOCIATE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1032.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	06	2018

Transaction ID : SA11AI.210881

Amount of Each Receipt this Period

94.24

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DAVIS, SANDRA, R., ,

Mailing Address 2212 W Lawrence Avenue

City
SpringfieldState
ILZip Code
62704FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
CHILD WELFARE SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208165

Amount of Each Receipt this Period

42.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

156.24

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DAVIS, TRACY, A., ,

Mailing Address 5501 W Gladys Avenue

City
ChicagoState
ILZip Code
60644FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
PUBLIC SERVICE ADMIN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

Transaction ID : SA11AI.208166

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DAWSON, JOHN, E., ,

Mailing Address 112 Stewart Avenue S

City
MansfieldState
OHZip Code
44906FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2018

Transaction ID : SA11AI.208832

Amount of Each Receipt this Period

9.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DAWSON, JOHN, E., ,

Mailing Address 112 Stewart Avenue S

City
MansfieldState
OHZip Code
44906FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

218.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.209463

Amount of Each Receipt this Period

9.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

61.00

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
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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. **DAWSON, JOHN, E., ,**

Mailing Address 112 Stewart Avenue S

City
Mansfield

State
OH

Zip Code
44906

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 ▼

228.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210102

Amount of Each Receipt this Period

9.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **DAY, CAMERON, , ,**

Mailing Address 426 W Belmont Avenue
Apt. 11

City
Chicago

State
IL

Zip Code
60657

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

641.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208167

Amount of Each Receipt this Period

65.68

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **DAY, SHONDALE, , ,**

Mailing Address 3355 Alden Place NE

City
Washington

State
DC

Zip Code
20019

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
GENERAL SERVICES MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206249

Amount of Each Receipt this Period

35.73

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

110.91

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DAY, SHONDALE, , ,

Mailing Address 3355 Alden Place NE

City
WashingtonState
DCZip Code
20019FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

GENERAL SERVICES MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.95

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	15	2018

Transaction ID : SA11AI.206610

Amount of Each Receipt this Period

35.73

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DAYOC, BRIAN, , ,

Mailing Address 4031 Executive Park Drive

City
HarrisburgState
PAZip Code
17111FEC 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 ▼

473.44

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	08	2018

Transaction ID : SA11AI.207020

Amount of Each Receipt this Period

43.04

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DEAHN, MICHAEL, P., ,Mailing Address 1701 Massachusettes Avenue NW
Apt. 205City
WashingtonState
DCZip Code
20036FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

STRATEGIC ANALYST I

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

773.23

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206252

Amount of Each Receipt this Period

33.57

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

112.34

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DEAHN, MICHAEL, P., ,Mailing Address 1701 Massachusettes Avenue NW
Apt. 205City
WashingtonState
DCZip Code
20036FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
STRATEGIC ANALYST I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

806.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2018

Transaction ID : SA11AI.206613

Amount of Each Receipt this Period

33.57

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DEAN, CHARLES, M., , JR

Mailing Address 237 Elkview Drive

City

Duncansville

State

PA

Zip Code

16635

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2018

Transaction ID : SA11AI.207021

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DEARINGER, DAWN, R., ,

Mailing Address 301 144th Street E

City

Tacoma

State

WA

Zip Code

98445

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28Occupation (for Individual)
ASSOCIATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	14	/	2018

Transaction ID : SA11AI.207803

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

73.57

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DEARTH, THOMAS, A., ,

Mailing Address 212 Brush Road

City
Marietta

State
OH

Zip Code
45750

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 ▼

207.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209464

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DEARTH, THOMAS, A., ,

Mailing Address 212 Brush Road

City
Marietta

State
OH

Zip Code
45750

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 ▼

216.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210103

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DEBOER, PRESTON, , ,

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 (for Individual)
AFSCME IA CN 61

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

416.60

Date of Receipt

10 / 18 / 2018

Transaction ID : SA11AI.211867

Amount of Each Receipt this Period

41.66

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

59.66

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 303 OF 1411

(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. DEBOER, PRESTON, , ,

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 (for Individual)
AFSCME IA CN 61

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.26

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.211894

Amount of Each Receipt this Period

41.66

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DEBOO, ALBERT, , ,

Mailing Address 1508 Seven Pines Road
#B

City
Springfield

State
IL

Zip Code
62701

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 COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208168

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DEBREI, AGOTA, , ,

Mailing Address 7410 Yellow Creek Drive

City
Poland

State
OH

Zip Code
44514

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 ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210104

Amount of Each Receipt this Period

8.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.16

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 304 OF 1411

(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. DECASAU, YESENIA, , ,

Mailing Address 4855 Seminole Drive

 City
 San Diego

 State
 CA

 Zip Code
 92115

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME CA LOC 3930

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	07	2018

Transaction ID : SA11AI.211145

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DECK, CATHY, A., ,

Mailing Address 1675 Lawrence Road

 City
 Delaware

 State
 OH

 Zip Code
 43015

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 DISASTER SERVICES COORDINATO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.208835

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DECK, CATHY, A., ,

Mailing Address 1675 Lawrence Road

 City
 Delaware

 State
 OH

 Zip Code
 43015

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 DISASTER SERVICES COORDINATOF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209466

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DECK, CATHY, A., ,

Mailing Address 1675 Lawrence Road

City
Delaware

State
OH

Zip Code
43015

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
DISASTER SERVICES COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210105

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DEHARTY, CHRISTOPHER, , ,

Mailing Address 2406 Myrtle Street

City
Sioux City

State
IA

Zip Code
51103

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/SIOUX

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 18 / 2018

Transaction ID : SA11AI.211835

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DEHARTY, CHRISTOPHER, , ,

Mailing Address 2406 Myrtle Street

City
Sioux City

State
IA

Zip Code
51103

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/SIOUX

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 24 / 2018

Transaction ID : SA11AI.211895

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

64.00

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
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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. DE JESUS, MARISOL, , ,

Mailing Address 119 Water Street

City
Gaithersburg

State
MD

Zip Code
20877

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
AREA ORGANIZING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

592.61

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206250

Amount of Each Receipt this Period

30.88

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DE JESUS, MARISOL, , ,

Mailing Address 119 Water Street

City
Gaithersburg

State
MD

Zip Code
20877

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
AREA ORGANIZING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

623.49

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206611

Amount of Each Receipt this Period

30.88

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DELGADO, RUBEN, , ,

Mailing Address 2326 Ferdinand Lane

City
Montgomery

State
IL

Zip Code
60538

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
WATER METER TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

202.02

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208169

Amount of Each Receipt this Period

19.24

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

81.00

**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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DELORME, MARK, S., ,

Mailing Address 8033 Excelsior Drive

City
MadisonState
WIZip Code
53717FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WI CN 32Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	16	2018

Transaction ID : SA11AI.211437

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DEL PINO, WILLIAM, , ,

Mailing Address 174 Norwich Lane

City
GaithersburgState
MDZip Code
20878FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
FIELD AUDITOR III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1120.64

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206253

Amount of Each Receipt this Period

53.05

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DEL PINO, WILLIAM, , ,

Mailing Address 174 Norwich Lane

City
GaithersburgState
MDZip Code
20878FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
FIELD AUDITOR III

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1173.69

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	15	2018

Transaction ID : SA11AI.206614

Amount of Each Receipt this Period

53.05

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

126.10

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 308 OF 1411

(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. DELP MARCINIAK, TAMMY, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M	D D	Y Y Y Y
10	25	2018

Transaction ID : SA11AI.207388

Amount of Each Receipt this Period

11.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DELP MARCINIAK, TAMMY, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.50

Date of Receipt

M M	D D	Y Y Y Y
11	09	2018

Transaction ID : SA11AI.207589

Amount of Each Receipt this Period

11.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DELP MARCINIAK, TAMMY, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

253.00

Date of Receipt

M M	D D	Y Y Y Y
11	26	2018

Transaction ID : SA11AI.207804

Amount of Each Receipt this Period

11.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

34.50

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

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DELUKE, MICHAEL, A., ,

Mailing Address 844 Manchester Avenue

City
Kent

State
OH

Zip Code
44240

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH CN 8

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

909.42

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210882

Amount of Each Receipt this Period

69.26

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DEMYAN, JAMES, A., ,

Mailing Address 34477 Law Road

City

Grafton

State

OH

Zip Code

44044

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 ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210106

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DENNISON, SHAWN, M., ,

Mailing Address 2012 Broadway Street

City

Springfield

State

OH

Zip Code

45504

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208837

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

87.76

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DENNISON, SHAWN, M., ,

Mailing Address 2012 Broadway Street

City
SpringfieldState
OHZip Code
45504FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.209468

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DENNISON, SHAWN, M., ,

Mailing Address 2012 Broadway Street

City
SpringfieldState
OHZip Code
45504FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210107

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DEPUTY, MAUDE, E., ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.207590

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

30.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DEPUTY, MAUDE, E., ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	26	2018

Transaction ID : SA11AI.207805

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DE RUITER, LISA, D., ,

Mailing Address 1672 Davis

City
RiponState
CAZip Code
95366FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA CN 57Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	24	2018

Transaction ID : SA11AI.211227

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DE STEFANO, ANDREW, J., ,Mailing Address 3901 Cathedral Avenue NW
Apt. 305City
WashingtonState
DCZip Code
20016FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
POLITICAL ACTION REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

654.19

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206251

Amount of Each Receipt this Period

31.01

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

61.01

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 312 OF 1411

(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. DE STEFANO, ANDREW, J., ,

Mailing Address 3901 Cathedral Avenue NW
Apt. 305

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)
POLITICAL ACTION REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

685.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206612

Amount of Each Receipt this Period

31.01

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DETROY, COLLEEN, , ,

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 (for Individual)
AFSCME INT'L/STATE STREET

Occupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 02 / 2018

Transaction ID : SA11AI.206615

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DEVEREUX, GREG, D., ,

Mailing Address 3561 Kamilche Point Road

City
Shelton

State
WA

Zip Code
98584

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28

Occupation (for Individual)
EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1599.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206148

Amount of Each Receipt this Period

14.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.01

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 313 OF 1411

(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. DEVEREUX, GREG, D., ,

Mailing Address 3561 Kamilche Point Road

City
Shelton

State
WA

Zip Code
98584

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28

Occupation (for Individual)

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1735.40

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2018

Transaction ID : SA11AI.207806

Amount of Each Receipt this Period

136.40

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DEVLIN, ROBERT, L., ,

Mailing Address 216 E. 46th Street

City
Tacoma

State
WA

Zip Code
98404

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 25 / 2018

Transaction ID : SA11AI.207390

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DEVLIN, ROBERT, L., ,

Mailing Address 216 E. 46th Street

City
Tacoma

State
WA

Zip Code
98404

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207591

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

162.40

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 314 OF 1411

(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. DEVLIN, ROBERT, L., ,

Mailing Address 216 E. 46th Street

City
Tacoma

State
WA

Zip Code
98404

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

11 / 26 / 2018

Transaction ID : SA11AI.207807

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DEVORE, KURT, E., ,

Mailing Address 2285 Dunwich Drive

City
Springfield

State
IL

Zip Code
62702

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
INFORMATION SYSTEMS ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

11 / 05 / 2018

Transaction ID : SA11AI.208170

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DEVORE, WILLIAM, A., ,

Mailing Address 4499 Stover Road

City
Ostrander

State
OH

Zip Code
43061

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

758.42

Date of Receipt

11 / 06 / 2018

Transaction ID : SA11AI.210883

Amount of Each Receipt this Period

69.26

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

112.26

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 315 OF 1411

(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. DEVOS-TECHAU, LEANN, S., ,

Mailing Address 4320 NW Second Avenue

City
Des MoinesState
IAZip Code
50313FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/STATE OF IAOccupation (for Individual)
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
10	18	2018

Transaction ID : SA11AI.211836

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DEVOS-TECHAU, LEANN, S., ,

Mailing Address 4320 NW Second Avenue

City
Des MoinesState
IAZip Code
50313FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/STATE OF IAOccupation (for Individual)
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
10	26	2018

Transaction ID : SA11AI.211896

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DEXTER, JEFFREY, , ,

Mailing Address 501 Dennis Avenue

City
BradleyState
ILZip Code
60915FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

762.79

Date of Receipt

M M	D D	Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208171

Amount of Each Receipt this Period

76.28

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

96.28

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 316 OF 1411

(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. DIAZ, EDWIN, E. , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 4900 Washington Avenue City Lorain State OH Zip Code 44052 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 ▼ 204.00			Date of Receipt 11 / 23 / 2018 Transaction ID : SA11AI.210108 Amount of Each Receipt this Period 8.50 ☐ Memo Item
B. DIBARTOLOMEO, ANASTASIA, L. , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 2033 Turnpike Road City Elizabethtown State PA Zip Code 17022 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME PA CN 13/STATE OF PA Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 440.00			Date of Receipt 10 / 31 / 2018 Transaction ID : SA11AI.207022 Amount of Each Receipt this Period 40.00 ☐ Memo Item
C. DIBBLE, JASON, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 303 12th Street SE City Austin State MN Zip Code 55912-4229 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME MN CN 5/STATE OF MN Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00			Date of Receipt 11 / 01 / 2018 Transaction ID : SA11AI.211655 Amount of Each Receipt this Period 20.00 ☐ Memo Item
SUBTOTAL of Receipts This Page (optional)..... ▶			68.50
TOTAL This Period (last page this line number only)..... ▶			

X	11a		11b		11c		12		
	13		14		15		16		17

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

FEC Schedule A (Form 3X) Rev. 06/2016

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 318 OF 1411

(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. DIGGS, KENNETH, , ,

Mailing Address 1361 Hamilton Street NW

City
Washington

State
DC

Zip Code
20011

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
REGIONAL MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1107.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 31 2018

Transaction ID : SA11AI.206255

Amount of Each Receipt this Period

51.90

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DIGGS, KENNETH, , ,

Mailing Address 1361 Hamilton Street NW

City
Washington

State
DC

Zip Code
20011

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
REGIONAL MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1159.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 15 2018

Transaction ID : SA11AI.206617

Amount of Each Receipt this Period

51.90

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DILLON, PAUL, J., ,

Mailing Address 164 Villard Street

City
Apple Creek

State
OH

Zip Code
44606

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 ▼

207.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 09 2018

Transaction ID : SA11AI.209470

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

112.80

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 319 OF 1411

(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. DILLON, PAUL, J., ,

Mailing Address 164 Villard Street

City

Apple Creek

State

OH

Zip Code

44606

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 ▼

216.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 11 / 23 / 2018

Transaction ID : SA11AI.210109

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DINEEN, STACIE, , ,

Mailing Address 80490 28th Street

City

Lawton

State

MI

Zip Code

49065

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MI CN 25

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2018

Transaction ID : SA11AI.211337

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DINEEN, STACIE, , ,

Mailing Address 80490 28th Street

City

Lawton

State

MI

Zip Code

49065

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MI CN 25

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 11 / 20 / 2018

Transaction ID : SA11AI.211383

Amount of Each Receipt this Period

10.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

30.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 320 OF 1411

(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. DIONNE, NORMAND, P., ,

Mailing Address 15-2692 Aweoweo Street

City
PahoaState
HIZip Code
96778FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 152Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	1			2	0	1	8		

Transaction ID : SA11AI.210990

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DIPPOLD-WEBB, ANTONIA, C., ,Mailing Address 1345 Euclid Street NW
Lower LevelCity
WashingtonState
DCZip Code
20009FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
POLITICAL ACTION REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

831.20

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			3	1			2	0	1	8		

Transaction ID : SA11AI.206256

Amount of Each Receipt this Period

36.47

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DIPPOLD-WEBB, ANTONIA, C., ,Mailing Address 1345 Euclid Street NW
Lower LevelCity
WashingtonState
DCZip Code
20009FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
POLITICAL ACTION REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

867.67

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			1	5			2	0	1	8		

Transaction ID : SA11AI.206618

Amount of Each Receipt this Period

36.47

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

97.94

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 321 OF 1411

(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. DIVELY, THOMAS, W., ,

Mailing Address 7982 Venice Heights Drive NE

City
WarrenState
OHZip Code
44484FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.209471

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DIVELY, THOMAS, W., ,

Mailing Address 7982 Venice Heights Drive NE

City
WarrenState
OHZip Code
44484FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210110

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DIVITTORE, LISA, , ,

Mailing Address 4031 Executive Park Drive

City
HarrisburgState
PAZip Code
17111FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

731.17

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2018

Transaction ID : SA11AI.207023

Amount of Each Receipt this Period

63.58

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

81.58

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DOBBINS, JULIUS, W., ,

Mailing Address 4799 Ashley Avenue

City
Columbus

State
OH

Zip Code
43213

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
MAINTENANCE REPAIR TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210111

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DOEING, KEVIN, , ,

Mailing Address 316 Quittie Park Drive

City
Annville

State
PA

Zip Code
17003

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 ▼

1026.95

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207024

Amount of Each Receipt this Period

89.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DOLLAR, TIFFANY, M., ,

Mailing Address P.O. Box 310

City
Trenton

State
NJ

Zip Code
08602-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1689.20

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206257

Amount of Each Receipt this Period

65.35

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

163.15

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DOLLAR, TIFFANY, M., ,

Mailing Address P.O. Box 310

City
TrentonState
NJZip Code
08602-0000FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1754.55

Date of Receipt

M M	D D	Y Y Y Y
11	15	2018

Transaction ID : SA11AI.206619

Amount of Each Receipt this Period

65.35

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DOMINA, DONNA, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M	D D	Y Y Y Y
10	25	2018

Transaction ID : SA11AI.207391

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DOMINA, DONNA, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
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
11	09	2018

Transaction ID : SA11AI.207592

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

105.35

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DOMINA, DONNA, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207808

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DOMINIC, RANDY, J., ,

Mailing Address 821 Painter Street

City
Streator

State
IL

Zip Code
61364

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

762.79

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208172

Amount of Each Receipt this Period

76.28

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DOMINQUEZ, ALEJAN, , , JR.

Mailing Address 1101 Mariposa Street

City
Gilroy

State
CA

Zip Code
95020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA CN 57

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

200.40

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2018

Transaction ID : SA11AI.211228

Amount of Each Receipt this Period

8.35

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

104.63

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DONAIRE, FELIPE, E., ,
 Mailing Address 2070 Sullivan Avenue
 #213

City Daly City	State CA	Zip Code 94015

FEC ID number of contributing federal political committee.

Name of Employer (for Individual)

AFSCME CA CN 57

Occupation (for Individual)

SOCIAL WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2018

Transaction ID : SA11AI.211229

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DONALDSON, CASH, , ,

Mailing Address 1212 Jefferson Street SE

City Olympia	State WA	Zip Code 98501

FEC ID number of contributing federal political committee.

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.207593

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DONALDSON, CASH, , ,

Mailing Address 1212 Jefferson Street SE

City Olympia	State WA	Zip Code 98501

FEC ID number of contributing federal political committee.

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2018

Transaction ID : SA11AI.207809

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DONOHUE, DANNY, , ,

Mailing Address 10 Longview Drive

City
Clifton ParkState
NYZip Code
12061FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME NY LOC 1000Occupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.80

Date of Receipt

M M	D D	Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206149

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DOREMUS, LLYN, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M	D D	Y Y Y Y
10	25	2018

Transaction ID : SA11AI.207393

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DOREMUS, LLYN, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
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
11	09	2018

Transaction ID : SA11AI.207594

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

54.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DOREMUS, LLYN, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207810

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DORNER, SARA, , ,

Mailing Address 29 N. Wacker Drive
Suite 800

City
Chicago

State
IL

Zip Code
60606

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

753.93

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208173

Amount of Each Receipt this Period

76.28

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DORSEY, COREY, D., ,

Mailing Address 4943 Botsford Drive

City
Columbus

State
OH

Zip Code
43232

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
DOCUMENT DELIVERY TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210112

Amount of Each Receipt this Period

8.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

104.78

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DOUGLAS, DANNY, , ,

Mailing Address 1723 Linn Hipsher Road

City
Marion

State
OH

Zip Code
43302

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208843

Amount of Each Receipt this Period

17.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DOUGLAS, DANNY, , ,

Mailing Address 1723 Linn Hipsher Road

City
Marion

State
OH

Zip Code
43302

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

402.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209474

Amount of Each Receipt this Period

17.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DOUGLAS, DANNY, , ,

Mailing Address 1723 Linn Hipsher Road

City
Marion

State
OH

Zip Code
43302

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
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 Y
11 / 23 / 2018

Transaction ID : SA11AI.210113

Amount of Each Receipt this Period

17.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

52.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DOUGLAS, RODNEY, , ,

Mailing Address 2753 W Warren Boulevard

City
ChicagoState
ILZip Code
60612FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

809.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			05			2018					

Transaction ID : SA11AI.208174

Amount of Each Receipt this Period

80.92

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DOUGLAS-BUMGARNER, MARCIA, M., ,

Mailing Address P.O. Box 232

City
LymanState
WAZip Code
98263FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			25			2018					

Transaction ID : SA11AI.207394

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DOUGLAS-BUMGARNER, MARCIA, M., ,

Mailing Address P.O. Box 232

City
LymanState
WAZip Code
98263FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			09			2018					

Transaction ID : SA11AI.207595

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

106.92

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DOUGLAS-BUMGARNER, MARCIA, M., ,

Mailing Address P.O. Box 232

 City
 Lyman

 State
 WA

 Zip Code
 98263

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.207811

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DOVER, DAVID, , ,

Mailing Address 6930 S. Campbell

 City
 Chicago

 State
 IL

 Zip Code
 60629

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME IL CN 31

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.208175

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DOWDELL, JOZETTE, D., ,

Mailing Address 3587 Rosebud Park Drive

 City
 Snellville

 State
 GA

 Zip Code
 30039

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME INT'L

 Occupation (for Individual)
 ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.206258

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DOWDELL, JOZETTE, D., ,

Mailing Address 3587 Rosebud Park Drive

City
Snellville

State
GA

Zip Code
30039

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

687.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206620

Amount of Each Receipt this Period

33.79

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DOWDLE, MICHELLE, D., ,

Mailing Address 20736 Canterbury Drive

City
Shorewood

State
IL

Zip Code
60404

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208176

Amount of Each Receipt this Period

26.32

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DOWELL, JUSTIN, A ., ,

Mailing Address 616 Wetmore Road

City
Columbus

State
OH

Zip Code
43214

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HIGHWAY TECHNICIAN IV

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209475

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

69.11

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DOWELL, JUSTIN, A ., ,

Mailing Address 616 Wetmore Road

City
Columbus

State
OH

Zip Code
43214

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HIGHWAY TECHNICIAN IV

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210114

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DOZIER, KATHRYN, I., ,

Mailing Address 11200 Hiawatha Lane

City
Indian Head Par

State
IL

Zip Code
60525

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

514.41

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208177

Amount of Each Receipt this Period

51.44

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DREUX, SHERLETA, D., ,

Mailing Address P.O. Box 2215

City
Carbondale

State
IL

Zip Code
62902

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
HUMAN SERVICES CASEWORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208178

Amount of Each Receipt this Period

33.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

93.44

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DREVNIAC, DAVID, A., ,

Mailing Address 136 S. Water Street

City

Loudonville

State

OH

Zip Code

44842

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

AUTOMOTIVE MECHANIC TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208845

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DREVNIAC, DAVID, A., ,

Mailing Address 136 S. Water Street

City

Loudonville

State

OH

Zip Code

44842

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

AUTOMOTIVE MECHANIC TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209476

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DREVNIAC, DAVID, A., ,

Mailing Address 136 S. Water Street

City

Loudonville

State

OH

Zip Code

44842

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

AUTOMOTIVE MECHANIC TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210115

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DRUSCHBA, CYNTHIA, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2018

Transaction ID : SA11AI.207596

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DRUSCHBA, CYNTHIA, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2018

Transaction ID : SA11AI.207812

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DUBRE, BRUCE, , ,

Mailing Address 6782 Mechanicsburg Road

City
SpringfieldState
ILZip Code
62712FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
SOCIAL SERV PROGRAM REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2018

Transaction ID : SA11AI.208179

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

50.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DUCHESSI, SHARON, , ,

Mailing Address 5614 Terrace Drive

City
Rocklin

State
CA

Zip Code
95765

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 3930

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211146

Amount of Each Receipt this Period

22.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DUCKWORTH, APRIL, D., ,

Mailing Address 322 Flatwood Fallen Timber Road

City
Lucasville

State
OH

Zip Code
45648

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
TRAINING OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208846

Amount of Each Receipt this Period

12.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DUCKWORTH, APRIL, D., ,

Mailing Address 322 Flatwood Fallen Timber Road

City
Lucasville

State
OH

Zip Code
45648

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
TRAINING OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

287.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209477

Amount of Each Receipt this Period

12.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

47.00

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DUCKWORTH, APRIL, D., ,

Mailing Address 322 Flatwood Fallen Timber Road

City
Lucasville

State
OH

Zip Code
45648

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
TRAINING OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210116

Amount of Each Receipt this Period

12.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DUDLEY, BRADLEY, J., ,

Mailing Address 59191 Palmer Street

City
Byesville

State
OH

Zip Code
43723

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 ▼

207.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209478

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DUDLEY, BRADLEY, J., ,

Mailing Address 59191 Palmer Street

City
Byesville

State
OH

Zip Code
43723

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 ▼

216.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210117

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

30.50

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DUGOVICH, ZACHARY, J., ,

Mailing Address 6023 126th Street SW

City
Mukilteo

State
WA

Zip Code
98275

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ORGANIZER IN TRAINING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1078.38

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206259

Amount of Each Receipt this Period

27.32

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DUGOVICH, ZACHARY, J., ,

Mailing Address 6023 126th Street SW

City
Mukilteo

State
WA

Zip Code
98275

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ORGANIZER IN TRAINING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1105.70

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206621

Amount of Each Receipt this Period

27.32

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DUNIVANT, MICHAEL, T., ,

Mailing Address 5675 Shay Ridge Road

City
New Matamoras

State
OH

Zip Code
45767

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 ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210118

Amount of Each Receipt this Period

8.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

63.14

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DUNN, MARGARET, S., ,

Mailing Address 3260 Van Hazen Street

City
WashingtonState
DCZip Code
20015FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
DIGITAL MARKETING SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1087.48

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206260

Amount of Each Receipt this Period

53.51

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DUNN, MARGARET, S., ,

Mailing Address 3260 Van Hazen Street

City
WashingtonState
DCZip Code
20015FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
DIGITAL MARKETING SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1140.99

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	15	2018

Transaction ID : SA11AI.206622

Amount of Each Receipt this Period

53.51

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DURHAM, SYLVIA, , ,

Mailing Address P.O. Box 28893

City
ColumbusState
OHZip Code
43228FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
SENIOR FINANCIAL ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209480

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

116.02

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DURHAM, SYLVIA, , ,

Mailing Address P.O. Box 28893

City
Columbus

State
OH

Zip Code
43228

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
SENIOR FINANCIAL ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210119

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DUTCH, EDWARD, , ,

Mailing Address 308 Maryland Avenue

City
Havertown

State
PA

Zip Code
19083

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.207025

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DYE, SCOTT, , ,

Mailing Address 234 Gallery Drive

City
Marysville

State
OH

Zip Code
43040

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 SERGEANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209481

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

59.00

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DYE, SCOTT, , ,

Mailing Address 234 Gallery Drive

City
Marysville

State
OH

Zip Code
43040

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 SERGEANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210120

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EAGLE, DENNIS, J., ,

Mailing Address 5007 26th Avenue SE

City
Lacey

State
WA

Zip Code
98503

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28

Occupation (for Individual)
DIRECTOR OF LPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 14 / 2018

Transaction ID : SA11AI.207813

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EASTMAN, BRIAN, J., ,

Mailing Address 390 Worthington Road

City
Westerville

State
OH

Zip Code
43082

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210121

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EATON, DINA, E., ,

Mailing Address 842 Martha Lane

City
Whitehall

State
OH

Zip Code
43213

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
INFORMATION SYSTEMS ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208851

Amount of Each Receipt this Period

14.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EATON, DINA, E., ,

Mailing Address 842 Martha Lane

City
Whitehall

State
OH

Zip Code
43213

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
INFORMATION SYSTEMS ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209482

Amount of Each Receipt this Period

14.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EATON, DINA, E., ,

Mailing Address 842 Martha Lane

City
Whitehall

State
OH

Zip Code
43213

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
INFORMATION SYSTEMS ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210122

Amount of Each Receipt this Period

14.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

43.50

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EBESUNO, ANN, N., ,

Mailing Address 285 Kuhilani Street

City
Hilo

State
HI

Zip Code
96720

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 152

Occupation (for Individual)
STAFF 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
11 / 01 / 2018

Transaction ID : SA11AI.210991

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ECHERD, VICKI, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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 Y
10 / 25 / 2018

Transaction ID : SA11AI.207396

Amount of Each Receipt this Period

12.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ECHERD, VICKI, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

262.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207597

Amount of Each Receipt this Period

12.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

46.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ECHERD, VICKI, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	26	2018

Transaction ID : SA11AI.207814

Amount of Each Receipt this Period

12.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ECKELS, LAURIE, , ,

Mailing Address 42 Profio Road

City
McDonaldState
PAZip Code
15057FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

862.62

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	08	2018

Transaction ID : SA11AI.207026

Amount of Each Receipt this Period

78.42

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ECKMAN, KENDRA, , ,

Mailing Address 4031 Executive Park Drive

City
HarrisburgState
PAZip Code
17111FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

731.67

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	08	2018

Transaction ID : SA11AI.207027

Amount of Each Receipt this Period

68.12

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

159.04

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
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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EDEN, LISA, S., ,

Mailing Address 2 Hillcrest Court

City
Taylorville

State
IL

Zip Code
62568

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
EXECUTIVE II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208180

Amount of Each Receipt this Period

44.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EDGERTON-SAUNDE, PAM, , ,

Mailing Address 1211 Belden Road

City
Columbus

State
OH

Zip Code
43229

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210123

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EDMONDS, MACEO, , ,

Mailing Address 500 N Edgelawn Drive

City
Aurora

State
IL

Zip Code
60506

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
JUVENILE JUSTICE OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208181

Amount of Each Receipt this Period

21.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

73.50

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
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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. EDSTROM, THOMAS, , ,

Mailing Address 4106 N. Sacramento

 City
 Chicago

 State
 IL

 Zip Code
 60618

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME IL CN 31

 Occupation (for Individual)
 LEGAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.208182

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EDWARDS, CHIQUITA, J., ,

Mailing Address 1017 Vine Street

 City
 Sandusky

 State
 OH

 Zip Code
 44870

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 FOOD SERVICE WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.209484

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EDWARDS, CHIQUITA, J., ,

Mailing Address 1017 Vine Street

 City
 Sandusky

 State
 OH

 Zip Code
 44870

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 FOOD SERVICE WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.210124

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EDWARDS, PAMELA, , ,

Mailing Address 1008 Blackadore Avenue

 City
 Pittsburgh

 State
 PA

 Zip Code
 15221

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME PA CN 13/NSP/LOCAL 2719

 Occupation (for Individual)
 ACCOUNTING CLERK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	D D	Y Y Y Y
11	08	2018

Transaction ID : SA11AI.207028

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EDWARDS, PATRICIA, A., ,

Mailing Address 720 Mox Chehalis Road

 City
 McCleary

 State
 WA

 Zip Code
 98557

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	D D	Y Y Y Y
10	25	2018

Transaction ID : SA11AI.207397

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EDWARDS, PATRICIA, A., ,

Mailing Address 720 Mox Chehalis Road

 City
 McCleary

 State
 WA

 Zip Code
 98557

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	D D	Y Y Y Y
11	09	2018

Transaction ID : SA11AI.207598

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EDWARDS, PATRICIA, A., ,

Mailing Address 720 Mox Chehalis Road

City
McCleary

State
WA

Zip Code
98557

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207815

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EDWARDS, SANDRA, , ,

Mailing Address 2097 Hackberry Street

City
Akron

State
OH

Zip Code
44301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
JUVENILE CORRECTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208854

Amount of Each Receipt this Period

12.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EDWARDS, SANDRA, , ,

Mailing Address 2097 Hackberry Street

City
Akron

State
OH

Zip Code
44301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
JUVENILE CORRECTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

287.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209485

Amount of Each Receipt this Period

12.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

46.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EDWARDS, SANDRA, , ,

Mailing Address 2097 Hackberry Street

 City
 Akron

 State
 OH

 Zip Code
 44301

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 JUVENILE CORRECTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210125

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EDWARDS, TINA, L., ,

Mailing Address 126 Luthers Mills Road

 City
 Towanda

 State
 PA

 Zip Code
 18848

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME PA CN 13/NSP/LOCAL 3896

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2018

Transaction ID : SA11AI.207029

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EICHELBERGER, ERIC, L., ,

Mailing Address 11150 S. Homewood

 City
 Chiacgo

 State
 IL

 Zip Code
 60643

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME IL CN 31/STATE OF IL

 Occupation (for Individual)
 HEAD LIBRARY CLERK

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

Transaction ID : SA11AI.208183

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EIERMAN, MEGAN, E., ,

Mailing Address 2250 Ne Flanders
#8

City
Portland

State
OR

Zip Code
97232

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
JOURNEY ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1920.96

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206261

Amount of Each Receipt this Period

99.18

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EIERMAN, MEGAN, E., ,

Mailing Address 2250 Ne Flanders
#8

City
Portland

State
OR

Zip Code
97232

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
JOURNEY ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2020.14

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206623

Amount of Each Receipt this Period

99.18

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EILANDER, RICKIE, , ,

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 (for Individual)
AFSCME IA CN 61

Occupation (for Individual)
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 Y
10 / 18 / 2018

Transaction ID : SA11AI.211868

Amount of Each Receipt this Period

42.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

240.36

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EILANDER, RICKIE, , ,

Mailing Address 4320 NW Second Avenue

 City
 Des Moines

 State
 IA

 Zip Code
 50313

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME IA CN 61

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2018

Transaction ID : SA11AI.211897

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EKEN, TAMMY, A., ,

Mailing Address 1041 Miamiview Road

 City
 North Bend

 State
 OH

 Zip Code
 45052

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH CN 8/CINCINNATTI CITY

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

Transaction ID : SA11AI.210884

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ELLETT, THOMAS, D., ,

Mailing Address N60 W38448 Blackhawk Drive

 City
 Oconomowoc

 State
 WI

 Zip Code
 53066

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME INT'L

 Occupation (for Individual)
 FIELD EDUCATION COORDINATOR II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2018

Transaction ID : SA11AI.206262

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 351 OF 1411

(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. ELLETT, THOMAS, D., ,

Mailing Address N60 W38448 Blackhawk Drive

City

Oconomowoc

State

WI

Zip Code

53066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

FIELD EDUCATION COORDINATOR II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

865.38

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206624

Amount of Each Receipt this Period

41.68

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ELLEY, GORDON, K., ,

Mailing Address 31517 36th Avenue S.

City

Auburn

State

WA

Zip Code

98001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
10 / 25 / 2018

Transaction ID : SA11AI.207816

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ELLIOTT, HELEN, H., ,

Mailing Address 1408 Wyeth Street

City

Harrisburg

State

PA

Zip Code

17102

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)
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
10 / 31 / 2018

Transaction ID : SA11AI.207030

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

72.18

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ELLIOTT, VICKIE, L., ,

Mailing Address 3285 Houston Road

 City
 Waynesville

 State
 OH

 Zip Code
 45068

 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 ▼

 204.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2018

Transaction ID : SA11AI.210126

Amount of Each Receipt this Period

 8.50
☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ELLIOTT, ZAID, M., ,

Mailing Address 1408 Wyeth Street

 City
 Harrisburg

 State
 PA

 Zip Code
 17102

 FEC ID number of contributing
 federal political committee.

 C

 Name of Employer (for Individual)
 AFSCME INT'L

 Occupation (for Individual)
 ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

 510.95

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2018

Transaction ID : SA11AI.206263

Amount of Each Receipt this Period

 26.04
☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ELLIOTT, ZAID, M., ,

Mailing Address 1408 Wyeth Street

 City
 Harrisburg

 State
 PA

 Zip Code
 17102

 FEC ID number of contributing
 federal political committee.

 C

 Name of Employer (for Individual)
 AFSCME INT'L

 Occupation (for Individual)
 ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

 536.99

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 11 / 15 / 2018

Transaction ID : SA11AI.206625

Amount of Each Receipt this Period

 26.04
☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

 60.58

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
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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. ELLIS, ELIZABETH, G., ,

Mailing Address 449 M Street NW
#2

City
Washington

State
DC

Zip Code
20001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.75

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206264

Amount of Each Receipt this Period

47.15

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ELLIS, ELIZABETH, G., ,

Mailing Address 449 M Street NW
#2

City
Washington

State
DC

Zip Code
20001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.90

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206626

Amount of Each Receipt this Period

47.15

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ELLIS, LAURA, M., ,

Mailing Address 5048 West Bay Road

City
Plaine field

State
OH

Zip Code
46168

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
FIELD ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

832.75

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206265

Amount of Each Receipt this Period

33.96

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

128.26

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

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ELLIS, LAURA, M., ,

Mailing Address 5048 West Bay Road

City
Plainefield

State
OH

Zip Code
46168

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

FIELD ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

867.83

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206627

Amount of Each Receipt this Period

35.08

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ELLIS, VERONICA, M., ,

Mailing Address 3624 Berkeley Drive

City
Toledo

State
OH

Zip Code
43612

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 ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209487

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ELLIS, VERONICA, M., ,

Mailing Address 3624 Berkeley Drive

City
Toledo

State
OH

Zip Code
43612

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 ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210127

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

53.08

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ELMORE, LORI, R., ,

Mailing Address 1763 North Cassady Avenue

City
Columbus

State
OH

Zip Code
43219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210128

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ELTZROTH, KARL, B ., ,

Mailing Address 696 N Walnut Street

City
Wilmington

State
OH

Zip Code
45177

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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209488

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ELTZROTH, KARL, B ., ,

Mailing Address 696 N Walnut Street

City
Wilmington

State
OH

Zip Code
45177

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210129

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EMERT, JOHN, W., ,

Mailing Address 712 Main Street

City
PolkState
PAZip Code
16342FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.207031

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EMSWILER, SUSAN, K., ,

Mailing Address 606 LaFayette Street

City

Lancaster

State

PA

Zip Code

17603

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/NSP/LOCAL 2540Occupation (for Individual)
HIGHER EDUCATION COORDINATOI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	08	2018

Transaction ID : SA11AI.207032

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ENGLISH, JOHN, A., ,

Mailing Address 3205 Admirals Walk Drive

City

Cohoes

State

NY

Zip Code

12047

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
INT'L UNION REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1036.80

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206266

Amount of Each Receipt this Period

49.59

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

81.59

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ENGLISH, JOHN, A., ,

Mailing Address 3205 Admirals Walk Drive

City
Cohoes

State
NY

Zip Code
12047

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

INT'L UNION REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1086.39

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206628

Amount of Each Receipt this Period

49.59

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ERICKSON, DARYL, , ,

Mailing Address 240 Parkridge Road

City

Mason City

State

IA

Zip Code

50401

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)

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 Y
10 / 18 / 2018

Transaction ID : SA11AI.211837

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ERICKSON, DARYL, , ,

Mailing Address 240 Parkridge Road

City

Mason City

State

IA

Zip Code

50401

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.211898

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

89.59

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ERNO, CARLENE, K., ,

Mailing Address 801 2nd Avenue West

City
AndalusiaState
ILZip Code
61232FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
CHILD WELFARE ADMIN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208184

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ERRICKSON, KURT, , ,Mailing Address 224 No. Smith Avenue
Apt. #12City
Saint PaulState
MNZip Code
55102FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/CN14Occupation (for Individual)
BUSINESS MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

789.02

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	01	2018

Transaction ID : SA11AI.211657

Amount of Each Receipt this Period

39.61

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ERVIN, BETH, A., ,

Mailing Address 4113 Bonser Run Road

City
SciotovilleState
OHZip Code
45662FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210130

Amount of Each Receipt this Period

8.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

123.11

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 359 OF 1411

(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. ESCUDERO, GILBERT, , ,

Mailing Address 14099 SW 17th Terrace

City
Miami

State
FL

Zip Code
33175

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L/STATE STREET

Occupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.65

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 02 / 2018

Transaction ID : SA11AI.206629

Amount of Each Receipt this Period

33.71

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ESEMAN, BRITTANY, A., ,

Mailing Address 4464 Washington Waterloo Road NE

City

Washington Court

State
OH

Zip Code
43160

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 ▼

209.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208859

Amount of Each Receipt this Period

9.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ESEMAN, BRITTANY, A., ,

Mailing Address 4464 Washington Waterloo Road NE

City

Washington Court

State
OH

Zip Code
43160

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 ▼

218.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209490

Amount of Each Receipt this Period

9.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

52.71

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 360 OF 1411

(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. ESEMAN, BRITTANY, A., ,

Mailing Address 4464 Washington Waterloo Road NE

City

Washington Court

State

OH

Zip Code

43160

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 ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210131

Amount of Each Receipt this Period

9.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ESHELMAN, SUE, , ,

Mailing Address 45100 Carr Road

City

Collville

State

OH

Zip Code

45723

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH CN 8

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 22 / 2018

Transaction ID : SA11AI.210794

Amount of Each Receipt this Period

9.62

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ESHELMAN, SUE, , ,

Mailing Address 45100 Carr Road

City

Collville

State

OH

Zip Code

45723

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH CN 8

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

221.26

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.210795

Amount of Each Receipt this Period

9.62

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

28.74

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 361 OF 1411

(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. ESHELMAN, SUE, , ,

Mailing Address 45100 Carr Road

City
Collville

State
OH

Zip Code
45723

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.88

Date of Receipt

11 / 14 / 2018

Transaction ID : SA11AI.210885

Amount of Each Receipt this Period

9.62

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EVANS, JEFFREY, M., ,

Mailing Address 210 Joelynn Drive

City
Shelby

State
OH

Zip Code
44875

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 ▼

204.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210132

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EVANS, MICHELLE, R., ,

Mailing Address 10201 Galena Pointe Drive

City
Galena

State
OH

Zip Code
43021

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8

Occupation (for Individual)
STAFF ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

867.64

Date of Receipt

11 / 06 / 2018

Transaction ID : SA11AI.210886

Amount of Each Receipt this Period

79.64

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

97.76

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 362 OF 1411

(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. EVANS, SUZANNE, M., ,

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 (for Individual)

AFSCME MN CN 5/ST. PAUL P.S.

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2018

Transaction ID : SA11AI.211658

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EVANS, TERESA, A., ,

Mailing Address P.O. Box 2

City

Tuppers Plains

State

OH

Zip Code

45783

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

ADMINISTRATIVE PROFESSIONAL

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208861

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EVANS, TERESA, A., ,

Mailing Address P.O. Box 2

City

Tuppers Plains

State

OH

Zip Code

45783

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

ADMINISTRATIVE PROFESSIONAL

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209492

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

40.00

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 363 OF 1411

(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. EVANS, TERESA, A., ,

Mailing Address P.O. Box 2

City

Tuppers Plains

State

OH

Zip Code

45783

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

ADMINISTRATIVE PROFESSIONAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210133

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EVANS, TIMOTHY, J., ,

Mailing Address 1835 Saint Anthony Avenue

City

Saint Paul

State

MN

Zip Code

55104

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)

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
11 / 01 / 2018

Transaction ID : SA11AI.211659

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EYINK, ANDREW, L., ,

Mailing Address 20 Lex Ontario Road
Apt. 2

City

Mansfield

State

OH

Zip Code

44904

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

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
10 / 26 / 2018

Transaction ID : SA11AI.208862

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 364 OF 1411

(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. EYINK, ANDREW, L., ,Mailing Address 20 Lex Ontario Road
Apt. 2City
MansfieldState
OHZip Code
44904FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M	D D	Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209493

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EYINK, ANDREW, L., ,Mailing Address 20 Lex Ontario Road
Apt. 2City
MansfieldState
OHZip Code
44904FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M	D D	Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210134

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FAIRBURN, TERRA, L., ,

Mailing Address 105 Hilltop Street

City
ColonaState
ILZip Code
61241FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
CHILD WELFARE ADMIN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M	D D	Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208185

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

70.00

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 365 OF 1411

(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. FAIRCHILD, BRADLEY, P., ,

Mailing Address 500 S State Circle

City
Galion

State
OH

Zip Code
44833

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208863

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FAIRCHILD, BRADLEY, P., ,

Mailing Address 500 S State Circle

City
Galion

State
OH

Zip Code
44833

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 ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209494

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FAIRCHILD, BRADLEY, P., ,

Mailing Address 500 S State Circle

City
Galion

State
OH

Zip Code
44833

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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210135

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 366 OF 1411

(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. FALK, MARY, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 11236 Georgia Avenue North City North Champlin State MN Zip Code 55316-3800 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME MN CN 5/STATE OF MN Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 705.00		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 01 / 2018 Transaction ID : SA11AI.211660 Amount of Each Receipt this Period 75.00 ☐ Memo Item
B. FALKNER, BRUCE, C., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 1119 N Menard City Chicago State IL Zip Code 60651 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME IL CN 31/STATE OF IL Occupation (for Individual) CORRECTIONAL COUNSELOR Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 416.60		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 05 / 2018 Transaction ID : SA11AI.208186 Amount of Each Receipt this Period 41.66 ☐ Memo Item
C. FAMBRO, SHEILA, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 1591 Sunny Acres Road City Copley State OH Zip Code 44321 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME OH CN8/AKRON METRO Occupation (for Individual) MAINTENANCE WORKER Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 242.34		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 22 / 2018 Transaction ID : SA11AI.210796 Amount of Each Receipt this Period 11.54 ☐ Memo Item
SUBTOTAL of Receipts This Page (optional)..... ▶		128.20
TOTAL This Period (last page this line number only)..... ▶		

X	11a		11b		11c		12		
	13		14		15		16		17

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

FEC Schedule A (Form 3X) Rev. 06/2016

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 368 OF 1411

(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. FARABAUGH, AMANDA, M., ,

Mailing Address 1011 Brick Road

City
Loretto

State
PA

Zip Code
15940

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 ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207033

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FARIA, YOLANDA, A., ,

Mailing Address 1374 Mailani Street

City
Hilo

State
HI

Zip Code
96720

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME HI RET CHPT 152

Occupation (for Individual)

RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211038

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FARLEY, FAITH, L., ,

Mailing Address 1380 Dever Road

City
Jackson

State
OH

Zip Code
45640

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 ▼

330.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208864

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 369 OF 1411

(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. FARLEY, FAITH, L., ,

Mailing Address 1380 Dever Road

City
JacksonState
OHZip Code
45640FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209495

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FARLEY, FAITH, L., ,

Mailing Address 1380 Dever Road

City
JacksonState
OHZip Code
45640FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210136

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FARQUHAR-BRADISH, BETSEY, , ,

Mailing Address 6800 N High Street

City
WorthingtonState
OHZip Code
43085FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/COLUMBUSOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

211.20

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	23	2018

Transaction ID : SA11AI.210798

Amount of Each Receipt this Period

9.60

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

39.60

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 370 OF 1411

(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. FARQUHAR-BRADISH, BETSEY, , ,

Mailing Address 6800 N High Street

 City
 Worthington

 State
 OH

 Zip Code
 43085

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH CN 8/COLUMBUS

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.210799

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FARQUHAR-BRADISH, BETSEY, , ,

Mailing Address 6800 N High Street

 City
 Worthington

 State
 OH

 Zip Code
 43085

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH CN 8/COLUMBUS

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.210888

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FAULKNER, GREGORY, , ,

Mailing Address 2801 Washington Avenue

 City
 Granite City

 State
 IL

 Zip Code
 62040

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME IL CN 31/STATE OF IL

 Occupation (for Individual)
 MAINTENANCE CRAFTSMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.208187

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 371 OF 1411

(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. FAY, AMANDA, M., ,

Mailing Address 208 1/2 W. Euclid Street

City

Green Springs

State

OH

Zip Code

44836

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

HOSPITAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208865

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FAY, AMANDA, M., ,

Mailing Address 208 1/2 W. Euclid Street

City

Green Springs

State

OH

Zip Code

44836

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

HOSPITAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209496

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FAY, AMANDA, M., ,

Mailing Address 208 1/2 W. Euclid Street

City

Green Springs

State

OH

Zip Code

44836

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

HOSPITAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210137

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

39.00

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 372 OF 1411

(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. FAY, JUSTIN, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 8033 Excelsior Drive <table> <tr> <td>City Madison</td> <td>State WI</td> <td>Zip Code 53717</td> </tr> </table> FEC ID number of contributing federal political committee. C <table> <tr> <td>Name of Employer (for Individual) AFSCME WI CN 32</td> <td>Occupation (for Individual) STAFF REPRESENTATIVE</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼			City Madison	State WI	Zip Code 53717	Name of Employer (for Individual) AFSCME WI CN 32	Occupation (for Individual) STAFF REPRESENTATIVE	Date of Receipt <table> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>24</td> <td></td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.211416 Amount of Each Receipt this Period <table> <tr> <td>9.23</td> </tr> </table> ☐ Memo Item	M M M	/	D D D	/	Y Y Y Y Y Y	10		24		2018	9.23
City Madison	State WI	Zip Code 53717																	
Name of Employer (for Individual) AFSCME WI CN 32	Occupation (for Individual) STAFF REPRESENTATIVE																		
M M M	/	D D D	/	Y Y Y Y Y Y															
10		24		2018															
9.23																			
B. FAY, JUSTIN, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 8033 Excelsior Drive <table> <tr> <td>City Madison</td> <td>State WI</td> <td>Zip Code 53717</td> </tr> </table> FEC ID number of contributing federal political committee. C <table> <tr> <td>Name of Employer (for Individual) AFSCME WI CN 32</td> <td>Occupation (for Individual) STAFF REPRESENTATIVE</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼			City Madison	State WI	Zip Code 53717	Name of Employer (for Individual) AFSCME WI CN 32	Occupation (for Individual) STAFF REPRESENTATIVE	Date of Receipt <table> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>01</td> <td></td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.211417 Amount of Each Receipt this Period <table> <tr> <td>9.23</td> </tr> </table> ☐ Memo Item	M M M	/	D D D	/	Y Y Y Y Y Y	11		01		2018	9.23
City Madison	State WI	Zip Code 53717																	
Name of Employer (for Individual) AFSCME WI CN 32	Occupation (for Individual) STAFF REPRESENTATIVE																		
M M M	/	D D D	/	Y Y Y Y Y Y															
11		01		2018															
9.23																			
C. FAY, JUSTIN, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 8033 Excelsior Drive <table> <tr> <td>City Madison</td> <td>State WI</td> <td>Zip Code 53717</td> </tr> </table> FEC ID number of contributing federal political committee. C <table> <tr> <td>Name of Employer (for Individual) AFSCME WI CN 32</td> <td>Occupation (for Individual) STAFF REPRESENTATIVE</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼			City Madison	State WI	Zip Code 53717	Name of Employer (for Individual) AFSCME WI CN 32	Occupation (for Individual) STAFF REPRESENTATIVE	Date of Receipt <table> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>16</td> <td></td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.211438 Amount of Each Receipt this Period <table> <tr> <td>9.23</td> </tr> </table> ☐ Memo Item	M M M	/	D D D	/	Y Y Y Y Y Y	11		16		2018	9.23
City Madison	State WI	Zip Code 53717																	
Name of Employer (for Individual) AFSCME WI CN 32	Occupation (for Individual) STAFF REPRESENTATIVE																		
M M M	/	D D D	/	Y Y Y Y Y Y															
11		16		2018															
9.23																			
SUBTOTAL of Receipts This Page (optional)..... ▶			<table> <tr> <td>27.69</td> </tr> </table>	27.69															
27.69																			
TOTAL This Period (last page this line number only)..... ▶			<table> <tr> <td></td> </tr> </table>																

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 373 OF 1411

(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. FAYE, ERIC, D., ,

Mailing Address 15 Tommy Been Road

City

Oak Hill

State

OH

Zip Code

45656

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 ▼

204.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210138

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FEATHERSTONE, TAMARA, J., ,

Mailing Address 2325 Deewood Drive

City

Columbus

State

OH

Zip Code

43229

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

ODJFS CUSTOMER SERVICE REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210139

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FEDERKIEL, TIMOTHY, , ,

Mailing Address 2516 County Road 253

City

Fremont

State

OH

Zip Code

43420

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 ▼

308.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.208868

Amount of Each Receipt this Period

14.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

31.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 374 OF 1411

(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. FEDERKIEL, TIMOTHY, , ,

Mailing Address 2516 County Road 253

City
FremontState
OHZip Code
43420FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CUSTODIAL WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209499

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FEDERKIEL, TIMOTHY, , ,

Mailing Address 2516 County Road 253

City
FremontState
OHZip Code
43420FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CUSTODIAL WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210140

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FELLER, RICHARD, M., ,Mailing Address 5480 Wisconsin Avenue
Apt. 1017City
Chevy ChaseState
MDZip Code
20815FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
ASSOCIATE DIRECTOR, POLITICAL A

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1254.20

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206268

Amount of Each Receipt this Period

62.71

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

90.71

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 375 OF 1411

(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. **FELLER, RICHARD, M., ,**

Mailing Address 5480 Wisconsin Avenue
Apt. 1017

City
Chevy Chase

State
MD

Zip Code
20815

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ASSOCIATE DIRECTOR, POLITICAL /

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1316.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206632

Amount of Each Receipt this Period

62.71

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **FELTERS, D. SAFIYA, , ,**

Mailing Address 2317 So Hamlin Avenue

City

Chicago

State

IL

Zip Code

60623

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208188

Amount of Each Receipt this Period

41.66

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **FELTON, DENIS, , ,**

Mailing Address 1212 Jefferson Street SE

City

Olympia

State

WA

Zip Code

98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207599

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

114.37

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 376 OF 1411

(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. FELTON, DENIS, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	M	D	D	D	Y	Y	Y	Y	Y	Y
1	1	1	2	6		2	0	1	8		

Transaction ID : SA11AI.207817

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FERGUSON, CANDACE, M., ,

Mailing Address 917 Roslyn Avenue

City
AkronState
OHZip Code
44320FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.00

Date of Receipt

M	M	M	D	D	D	Y	Y	Y	Y	Y	Y
1	0		2	6		2	0	1	8		

Transaction ID : SA11AI.208869

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FERGUSON, CANDACE, M., ,

Mailing Address 917 Roslyn Avenue

City
AkronState
OHZip Code
44320FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

253.00

Date of Receipt

M	M	M	D	D	D	Y	Y	Y	Y	Y	Y
1	1		0	9		2	0	1	8		

Transaction ID : SA11AI.209500

Amount of Each Receipt this Period

11.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

32.00

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 377 OF 1411

(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. FERGUSON, CANDACE, M., ,

Mailing Address 917 Roslyn Avenue

City
Akron

State
OH

Zip Code
44320

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 ▼

264.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210141

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FERGUSON-MIYAMOTO, JACQUELINE, M., ,

Mailing Address 1374 Mailani Street

City
Hilo

State
HI

Zip Code
96720

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 152

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.210992

Amount of Each Receipt this Period

41.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FERRARO, JASPER, , ,

Mailing Address 710 John Street

City
Rockford

State
IL

Zip Code
61103

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L/STATE STREET

Occupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 02 / 2018

Transaction ID : SA11AI.206633

Amount of Each Receipt this Period

21.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

73.67

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 378 OF 1411

(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. FERRITTO, ANGELA, , ,

Mailing Address 1053 Newton Avenue

City
ErieState
PAZip Code
16511FEC ID number of contributing
federal political committee.

Name of Employer (for Individual)

AFSCME PA CN 13

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.207034

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FICETI, VINCE, P., ,

Mailing Address 613 Washington Avenue

City
NilesState
OHZip Code
44446FEC ID number of contributing
federal political committee.

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 ▼

Date of Receipt

 / /

Transaction ID : SA11AI.208870

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FICETI, VINCE, P., ,

Mailing Address 613 Washington Avenue

City
NilesState
OHZip Code
44446FEC ID number of contributing
federal political committee.

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 ▼

Date of Receipt

 / /

Transaction ID : SA11AI.209501

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 379 OF 1411

(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. FICETI, VINCE, P., ,

Mailing Address 613 Washington Avenue

City
Niles

State
OH

Zip Code
44446

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 ▼

264.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210142

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FIDLER, GERALD, F., ,

Mailing Address 7123 Falcon Street

City
Annadale

State
VA

Zip Code
22003

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
POLITICAL ACTION REP III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1299.64

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206269

Amount of Each Receipt this Period

53.05

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FIDLER, GERALD, F., ,

Mailing Address 7123 Falcon Street

City
Annadale

State
VA

Zip Code
22003

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
POLITICAL ACTION REP III

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1352.69

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206634

Amount of Each Receipt this Period

53.05

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

117.10

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 380 OF 1411

(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. FILAK, JOHN, J., Jr. Mailing Address 6160 Clingan Road <table border="1"> <tr> <td>City Poland</td> <td>State OH</td> <td>Zip Code 44514</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1"> <tr> <td>Name of Employer (for Individual) AFSCME OH CN 8</td> <td>Occupation (for Individual) STAFF REPRESENTATIVE</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 1032.00			City Poland	State OH	Zip Code 44514	Name of Employer (for Individual) AFSCME OH CN 8	Occupation (for Individual) STAFF REPRESENTATIVE	Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td>06</td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.210889 Amount of Each Receipt this Period 94.24 ☐ Memo Item		M M M	D D D	Y Y Y Y Y Y	11	06	2018
City Poland	State OH	Zip Code 44514													
Name of Employer (for Individual) AFSCME OH CN 8	Occupation (for Individual) STAFF REPRESENTATIVE														
M M M	D D D	Y Y Y Y Y Y													
11	06	2018													
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. FILLMAN, DAVID, , , Mailing Address 2520 Helen Street <table border="1"> <tr> <td>City Hatboro</td> <td>State PA</td> <td>Zip Code 19040</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1"> <tr> <td>Name of Employer (for Individual) AFSCME PA CN 13</td> <td>Occupation (for Individual) EXECUTIVE DIRECTOR</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 1772.33			City Hatboro	State PA	Zip Code 19040	Name of Employer (for Individual) AFSCME PA CN 13	Occupation (for Individual) EXECUTIVE DIRECTOR	Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td>31</td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.206150 Amount of Each Receipt this Period 14.00 ☐ Memo Item		M M M	D D D	Y Y Y Y Y Y	10	31	2018
City Hatboro	State PA	Zip Code 19040													
Name of Employer (for Individual) AFSCME PA CN 13	Occupation (for Individual) EXECUTIVE DIRECTOR														
M M M	D D D	Y Y Y Y Y Y													
10	31	2018													
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. FILLMAN, DAVID, , , Mailing Address 2520 Helen Street <table border="1"> <tr> <td>City Hatboro</td> <td>State PA</td> <td>Zip Code 19040</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1"> <tr> <td>Name of Employer (for Individual) AFSCME PA CN 13</td> <td>Occupation (for Individual) EXECUTIVE DIRECTOR</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) Aggregate Year-to-Date ▼ 1927.79			City Hatboro	State PA	Zip Code 19040	Name of Employer (for Individual) AFSCME PA CN 13	Occupation (for Individual) EXECUTIVE DIRECTOR	Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td>08</td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.207035 Amount of Each Receipt this Period 155.46 ☐ Memo Item		M M M	D D D	Y Y Y Y Y Y	11	08	2018
City Hatboro	State PA	Zip Code 19040													
Name of Employer (for Individual) AFSCME PA CN 13	Occupation (for Individual) EXECUTIVE DIRECTOR														
M M M	D D D	Y Y Y Y Y Y													
11	08	2018													
SUBTOTAL of Receipts This Page (optional).....▶			263.70												
TOTAL This Period (last page this line number only).....▶															

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 381 OF 1411

(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. FINAN, TIMOTHY, , ,

Mailing Address 6800 N High Street

City
Worthington

State
OH

Zip Code
43085

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.24

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 23 / 2018

Transaction ID : SA11AI.210800

Amount of Each Receipt this Period

10.42

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FINAN, TIMOTHY, , ,

Mailing Address 6800 N High Street

City
Worthington

State
OH

Zip Code
43085

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.66

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 13 / 2018

Transaction ID : SA11AI.210801

Amount of Each Receipt this Period

10.42

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FINAN, TIMOTHY, , ,

Mailing Address 6800 N High Street

City
Worthington

State
OH

Zip Code
43085

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.08

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.210890

Amount of Each Receipt this Period

10.42

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

31.26

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 382 OF 1411

(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. FINKLEA, BEVERLY, A., ,

Mailing Address 6400 Fallsburg Road NE

City
Newark

State
OH

Zip Code
43055

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
UNEMPLOYMENT COMPENS REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210143

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FIRKUS, LAURA, L., ,

Mailing Address 43695 Deerfield Drive

City

Sturgeon Lake

State

MN

Zip Code

55783

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211661

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FISCHER, MICHAEL, P., ,

Mailing Address 14 Sunset Drive

City

Danville

State

PA

Zip Code

17821

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)
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
10 / 31 / 2018

Transaction ID : SA11AI.207036

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

48.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FISHER, STEVEN, D., ,

Mailing Address 27 15th Street

City
CloquetState
MNZip Code
55720FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MNOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	1			2	0	1	8		

Transaction ID : SA11AI.211662

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FISHER, TODD, R., ,

Mailing Address 219 N. Willow Street

City
KentState
OHZip Code
44240FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ENVIRONMENTAL SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

418.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	8		

Transaction ID : SA11AI.208872

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FISHER, TODD, R., ,

Mailing Address 219 N. Willow Street

City
KentState
OHZip Code
44240FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ENVIRONMENTAL SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

437.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	9			2	0	1	8		

Transaction ID : SA11AI.209503

Amount of Each Receipt this Period

19.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

58.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 384 OF 1411

(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. FISHER, TODD, R., ,

Mailing Address 219 N. Willow Street

City
KentState
OHZip Code
44240FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

ENVIRONMENTAL SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	3			2	0	1	8		

Transaction ID : SA11AI.210144

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FISHER, WYNN, L., ,

Mailing Address P.O. Box 525

City

New Bradford

State

PA

Zip Code

16140

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME PA CN 13/NSP/LOCAL 2902

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

770.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	8			2	0	1	8		

Transaction ID : SA11AI.207037

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FITCH, HEATHER, , ,

Mailing Address 1212 Jefferson Street SE

City

Olympia

State

WA

Zip Code

98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	9			2	0	1	8		

Transaction ID : SA11AI.207600

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

64.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 385 OF 1411

(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. FITCH, HEATHER, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 26 / 2018

Transaction ID : SA11AI.207818

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FITZGERALD, RHONYA, , ,

Mailing Address 120 North spencer

City
Mounds

State
IL

Zip Code
62964

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
HUMAN SERVICES CASEWORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.82

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208189

Amount of Each Receipt this Period

31.26

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FLANNERY, VIRGIL, G., ,

Mailing Address P.O. Box 170

City
Frankfort

State
OH

Zip Code
45628

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208873

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

51.26

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FLANNERY, VIRGIL, G., ,

Mailing Address P.O. Box 170

City
Frankfort

State
OH

Zip Code
45628

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 ▼

230.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209504

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FLANNERY, VIRGIL, G., ,

Mailing Address P.O. Box 170

City
Frankfort

State
OH

Zip Code
45628

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 ▼

240.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210145

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FLEMING, RICHARD, A., ,

Mailing Address P.O. Box 359

City
Kapowsin

State
WA

Zip Code
98344

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

10 / 25 / 2018

Transaction ID : SA11AI.207400

Amount of Each Receipt this Period

10.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

30.50

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

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FLEMING, RICHARD, A., ,

Mailing Address P.O. Box 359

 City
 Kapowsin

 State
 WA

 Zip Code
 98344

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.207601

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FLEMING, RICHARD, A., ,

Mailing Address P.O. Box 359

 City
 Kapowsin

 State
 WA

 Zip Code
 98344

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.207819

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FLOWERS, BEATRICE, , ,

Mailing Address 3954 Alwood Lane

 City
 Groveport

 State
 OH

 Zip Code
 43125

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.209505

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FLOWERS, BEATRICE, , ,

Mailing Address 3954 Alwood Lane

City
GroveportState
OHZip Code
43125FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210146

Amount of Each Receipt this Period

12.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FONSECA, AMY, , ,

Mailing Address 1025 Redmond Avenue

City
San JoseState
CAZip Code
95120FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA CN 57Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.40

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	14	2018

Transaction ID : SA11AI.211230

Amount of Each Receipt this Period

8.35

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FORD, BRYSON, G., ,

Mailing Address 54 California Blvd.

City
ToledoState
OHZip Code
43612FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209506

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

29.85

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
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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. FORD, BRYSON, G., ,

Mailing Address 54 California Blvd.

City
Toledo

State
OH

Zip Code
43612

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 ▼

216.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210147

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FORD, JOSEPH, , ,

Mailing Address 2200 Palisade Avenue
Apt. 2

City
Modesto

State
CA

Zip Code
95350

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 3930

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

11 / 07 / 2018

Transaction ID : SA11AI.211147

Amount of Each Receipt this Period

24.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FORD, TASHANA, , ,

Mailing Address 54 California Blvd.

City
Toledo

State
OH

Zip Code
43612

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 ▼

207.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209507

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

42.00

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FORD, TASHANA, , ,

Mailing Address 54 California Blvd.

City
Toledo

State
OH

Zip Code
43612

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 ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210148

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FOREMAN, KELLY, A., ,

Mailing Address 887 Vista Drive

City
Columbus

State
OH

Zip Code
43230

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
BUSINESS PROCESS ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208877

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FOREMAN, KELLY, A., ,

Mailing Address 887 Vista Drive

City
Columbus

State
OH

Zip Code
43230

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
BUSINESS PROCESS ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

253.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209508

Amount of Each Receipt this Period

11.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

31.00

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FOREMAN, KELLY, A., ,

Mailing Address 887 Vista Drive

City
Columbus

State
OH

Zip Code
43230

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
BUSINESS PROCESS ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210149

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FOSTER, JACOB, , ,

Mailing Address 190 W. Ostend Street
Suite 101

City
Baltimore

State
MD

Zip Code
21230

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MD CN 3

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.20

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211315

Amount of Each Receipt this Period

72.42

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FOWLER, RHONDA, S., ,

Mailing Address 421 Pioneer Road

City
Des Moines

State
IA

Zip Code
50315

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

268.83

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 18 / 2018

Transaction ID : SA11AI.211838

Amount of Each Receipt this Period

19.20

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

102.62

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FOWLER, RHONDA, S., ,

Mailing Address 421 Pioneer Road

City
Des Moines

State
IA

Zip Code
50315

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.03

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.211899

Amount of Each Receipt this Period

19.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FOX, CHRISTOPHER, J., ,

Mailing Address 2423 Winding Ridge Road

City
Odenton

State
MD

Zip Code
21113

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
FISCAL POLICY ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1079.01

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206272

Amount of Each Receipt this Period

53.05

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FOX, CHRISTOPHER, J., ,

Mailing Address 2423 Winding Ridge Road

City
Odenton

State
MD

Zip Code
21113

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
FISCAL POLICY ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1132.06

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206637

Amount of Each Receipt this Period

53.05

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.30

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
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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. FOX, EDWARD, MICHAEL, ,

Mailing Address 51 E Bayshore Drive

City
Shelton

State
WA

Zip Code
98584

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L/STATE STREET

Occupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2093.02

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 02 / 2018

Transaction ID : SA11AI.206638

Amount of Each Receipt this Period

191.36

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FOX, RICHARD, L., ,

Mailing Address 2133 Whittier Avenue

City
Springfield

State
IL

Zip Code
62704

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
CORRECTIONS SERGEANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208190

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FRANCIS, WALTER, , ,

Mailing Address 1002 Cypress Road

City
Wilmington

State
DE

Zip Code
19810

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 ▼

912.56

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207038

Amount of Each Receipt this Period

82.96

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

295.32

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
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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. FRANE, PATRICK, D., ,

Mailing Address 2729 Nakookoo Street
Suite 101

City
Honolulu

State
HI

Zip Code
96826

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI RET CHPT 152

Occupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.211808

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FRANK, GARETH, J., ,

Mailing Address 2309 Parkway

City
Cheverly

State
MD

Zip Code
20785

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L/STATE STREET

Occupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

885.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 02 / 2018

Transaction ID : SA11AI.206639

Amount of Each Receipt this Period

80.92

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FRANKLIN, GERALD, , ,

Mailing Address 1444 W Pratt

City
Chicago

State
IL

Zip Code
60626

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208191

Amount of Each Receipt this Period

23.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

403.92

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FRANKLIN, MICHAEL, A., ,

Mailing Address 7056 Hayes Orangeville Road NE

City
BurghillState
OHZip Code
44404FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION SERGEANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	6		2	0	1	8

Transaction ID : SA11AI.208878

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FRANKLIN, MICHAEL, A., ,

Mailing Address 7056 Hayes Orangeville Road NE

City
BurghillState
OHZip Code
44404FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION SERGEANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	9		2	0	1	8

Transaction ID : SA11AI.209509

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FRANKLIN, MICHAEL, A., ,

Mailing Address 7056 Hayes Orangeville Road NE

City
BurghillState
OHZip Code
44404FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION SERGEANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	3		2	0	1	8

Transaction ID : SA11AI.210150

Amount of Each Receipt this Period

13.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

39.00

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 396 OF 1411

(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. FRANKMOELLE, HEIDI, , ,

Mailing Address 4902 N. 19th Street

City
Tacoma

State
WA

Zip Code
98406

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

POLITICAL ACTION POLLING ASSIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.20

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206273

Amount of Each Receipt this Period

45.28

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FRANKMOELLE, HEIDI, , ,

Mailing Address 4902 N. 19th Street

City
Tacoma

State
WA

Zip Code
98406

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

POLITICAL ACTION POLLING ASSIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

945.48

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206640

Amount of Each Receipt this Period

45.28

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FRAUENHOLZ, RICHARD, , ,

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 (for Individual)

AFSCME IA CN 61/DAVENPORT CSD

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

896.30

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 18 / 2018

Transaction ID : SA11AI.211900

Amount of Each Receipt this Period

83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

173.89

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FRAZIER, DENNIS, D., ,

Mailing Address 2677 Greenfield Drive

City
Zim

State
MN

Zip Code
55738

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/ST. LOUIS CNTY

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 29 / 2018

Transaction ID : SA11AI.211619

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FRAZIER, DENNIS, D., ,

Mailing Address 2677 Greenfield Drive

City
Zim

State
MN

Zip Code
55738

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/ST. LOUIS CNTY

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

445.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.211620

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FRAZIER, DENNIS, D., ,

Mailing Address 2677 Greenfield Drive

City
Zim

State
MN

Zip Code
55738

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/ST. LOUIS CNTY

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

465.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 21 / 2018

Transaction ID : SA11AI.211663

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

60.00

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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☒ 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FRAZIER, MICHAEL, S., ,

Mailing Address 6316 New London Drive

City
Columbus

State
OH

Zip Code
43231

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
CERTIFICATION TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209510

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FRAZIER, MICHAEL, S., ,

Mailing Address 6316 New London Drive

City
Columbus

State
OH

Zip Code
43231

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
CERTIFICATION TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210151

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FREDRICKSON, PAULA, J., ,

Mailing Address 50 Marks Drive

City
Silver Bay

State
MN

Zip Code
55614

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 01 / 2018

Transaction ID : SA11AI.211664

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

38.00

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FREEMAN, REGINA, C., ,

Mailing Address 1953 Jared Place

City
LIMA

State
OH

Zip Code
45805

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
CIVIL RIGHTS INVESTIGATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208880

Amount of Each Receipt this Period

14.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FREEMAN, REGINA, C., ,

Mailing Address 1953 Jared Place

City
LIMA

State
OH

Zip Code
45805

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
CIVIL RIGHTS INVESTIGATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209511

Amount of Each Receipt this Period

14.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FREEMAN, REGINA, C., ,

Mailing Address 1953 Jared Place

City
LIMA

State
OH

Zip Code
45805

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
CIVIL RIGHTS INVESTIGATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210152

Amount of Each Receipt this Period

14.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

43.50

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FREES, DONALD, I., ,

Mailing Address 131 West Oley Street

City
Allentown

State
PA

Zip Code
19601

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/NSP/LOCAL 462

Occupation (for Individual)
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 Y
11 / 08 / 2018

Transaction ID : SA11AI.207039

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FREY, JOSHUA, M., ,

Mailing Address 9675 La Catina Circle

City
Plain City

State
OH

Zip Code
43064

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 ▼

209.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208881

Amount of Each Receipt this Period

9.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FREY, JOSHUA, M., ,

Mailing Address 9675 La Catina Circle

City
Plain City

State
OH

Zip Code
43064

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 ▼

218.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209512

Amount of Each Receipt this Period

9.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

49.00

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FREY, JOSHUA, M., ,

Mailing Address 9675 La Catina Circle

City
Plain City

State
OH

Zip Code
43064

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 ▼

228.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210153

Amount of Each Receipt this Period

9.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FREY, SCOTT, L., ,

Mailing Address 618 S. Payne Street

City
Alexandria

State
VA

Zip Code
22314

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
DIRECTOR, FEDERAL GOVERNMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2510.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206274

Amount of Each Receipt this Period

120.52

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FREY, SCOTT, L., ,

Mailing Address 618 S. Payne Street

City
Alexandria

State
VA

Zip Code
22314

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
DIRECTOR, FEDERAL GOVERNMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2630.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206641

Amount of Each Receipt this Period

120.52

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.54

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FRONTERA, JEFFRIE, J., ,

Mailing Address 5263 Dyke Street

City
Pittsburgh

State
PA

Zip Code
15207

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/NSP/LOCAL 297

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207040

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FRYE, CATHRIN, E., ,

Mailing Address P.O. Box 252

City
So. Prairie

State
WA

Zip Code
98385

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
10 / 25 / 2018

Transaction ID : SA11AI.207401

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FRYE, CATHRIN, E., ,

Mailing Address P.O. Box 252

City
So. Prairie

State
WA

Zip Code
98385

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207602

Amount of Each Receipt this Period

10.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

71.00

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FRYE, CATHRIN, E., ,

Mailing Address P.O. Box 252

City

So. Prairie

State

WA

Zip Code

98385

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207820

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FRYE, DARBY, , ,

Mailing Address 5954 49th Avenue SW

City

Seattle

State

WA

Zip Code

98136

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28

Occupation (for Individual)

LABOR EDUCATOR

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 14 / 2018

Transaction ID : SA11AI.207821

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FRYE, JAMES, E., ,

Mailing Address 11510 Waesche Drive

City

Bowie

State

MD

Zip Code

20721

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

STAFF SPECIALIST II

Receipt For:

☐ Primary☐ General☐ Other (specify)

Aggregate Year-to-Date ▼

894.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206275

Amount of Each Receipt this Period

45.57

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

76.07

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 404 OF 1411

(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. FRYE, JAMES, E., ,

Mailing Address 11510 Waesche Drive

City
Bowie

State
MD

Zip Code
20721

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
STAFF SPECIALIST II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

939.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206642

Amount of Each Receipt this Period

45.57

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FRYER, RICHARD, J., ,

Mailing Address 933 Emerald Drive

City

Pingree Grove

State

IL

Zip Code

60140

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
CORRECTIONS OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208192

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FRYMOYER, MARK, J., ,

Mailing Address 518 Reuel Avenue

City

Kellogg

State

IA

Zip Code

50134

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

941.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2018

Transaction ID : SA11AI.211869

Amount of Each Receipt this Period

83.34

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

149.91

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 405 OF 1411

(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. FRYMOYER, MARK, J., ,

Mailing Address 518 Reuel Avenue

City
KelloggState
IAZip Code
50134FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IA CN 61

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

951.40

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	06	2018

Transaction ID : SA11AI.211901

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FUJIMOTO, GAIL, , ,Mailing Address 888 Mililani Street
Suite 601City
HonoluluState
HIZip Code
96813-2991FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME HI RET CHPT 152

Occupation (for Individual)

RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	01	2018

Transaction ID : SA11AI.211039

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FUNK, MICHAEL, A., ,

Mailing Address 252 6th Avenue

City
MansfieldState
OHZip Code
44905FEC 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 ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.208882

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

45.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 406 OF 1411

(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. FUNK, MICHAEL, A., ,

Mailing Address 252 6th Avenue

City
Mansfield

State
OH

Zip Code
44905

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 ▼

230.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209513

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FUNK, MICHAEL, A., ,

Mailing Address 252 6th Avenue

City
Mansfield

State
OH

Zip Code
44905

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 ▼

240.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210154

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FUSCONE, JOSEPHINE, M., ,

Mailing Address 48 Harbor Court
Unit 208

City
Naperville

State
IL

Zip Code
60565

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
SECRETARY III

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

378.00

Date of Receipt

11 / 05 / 2018

Transaction ID : SA11AI.208193

Amount of Each Receipt this Period

42.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

62.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 407 OF 1411

(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. GABRIEL, PAIGE, N., ,

Mailing Address 300 Piper Lane

City
Solon

State
IA

Zip Code
52333

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)
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 Y
10 / 18 / 2018

Transaction ID : SA11AI.211839

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GABRIEL, PAIGE, N., ,

Mailing Address 300 Piper Lane

City
Solon

State
IA

Zip Code
52333

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.211902

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GADBERRY, LAWANA, R., ,

Mailing Address 9496 Jurupa Road

City
Riverside

State
CA

Zip Code
92509

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 3930

Occupation (for Individual)
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
11 / 07 / 2018

Transaction ID : SA11AI.211148

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 408 OF 1411
(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. GADDIS, KODI, A., ,Mailing Address 623 Eastside Stree SE
Apt. 308City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	25	2018

Transaction ID : SA11AI.207402

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GADDIS, KODI, A., ,Mailing Address 623 Eastside Stree SE
Apt. 308City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.207603

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GADDIS, KODI, A., ,Mailing Address 623 Eastside Stree SE
Apt. 308City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	26	2018

Transaction ID : SA11AI.207822

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

60.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 409 OF 1411
(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. GAINES, BRETT, E., ,

Mailing Address 692 N Maple Street

City
MarysvilleState
OHZip Code
43040FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.00

Date of Receipt

M	M	M	D	D	D	Y	Y	Y	Y	Y	Y
1	0		2	6		2	0	1	8		

Transaction ID : SA11AI.208883

Amount of Each Receipt this Period

17.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GAINES, BRETT, E., ,

Mailing Address 692 N Maple Street

City
MarysvilleState
OHZip Code
43040FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.00

Date of Receipt

M	M	M	D	D	D	Y	Y	Y	Y	Y	Y
1	1		0	9		2	0	1	8		

Transaction ID : SA11AI.209514

Amount of Each Receipt this Period

17.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GAINES, BRETT, E., ,

Mailing Address 692 N Maple Street

City
MarysvilleState
OHZip Code
43040FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

408.00

Date of Receipt

M	M	M	D	D	D	Y	Y	Y	Y	Y	Y
1	1		2	3		2	0	1	8		

Transaction ID : SA11AI.210155

Amount of Each Receipt this Period

17.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

51.00

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 410 OF 1411

(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. GALLAGHER, BRETT, E., ,

Mailing Address 2236 N.Magnolia Avenue

City
Chicago

State
IL

Zip Code
60614

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

ASSISTANT PUBLIC DEFENDANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 18 / 2018

Transaction ID : SA11AI.210765

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GALLAGHER, BRETT, E., ,

Mailing Address 2236 N.Magnolia Avenue

City
Chicago

State
IL

Zip Code
60614

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

ASSISTANT PUBLIC DEFENDANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208194

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GALLAGHER, JOAN, , ,

Mailing Address P.O. Box 357

City
Bucoda

State
WA

Zip Code
98530

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28

Occupation (for Individual)

COUNCIL 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
11 / 14 / 2018

Transaction ID : SA11AI.207823

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 411 OF 1411

(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. GALLAGHER, KERRI, , ,

Mailing Address 8 South Main Street

City

Mountain Top

State

PA

Zip Code

18707

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME PA CN 13

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1533.26

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207041

Amount of Each Receipt this Period

125.24

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GALUSKA, JOHN, , ,

Mailing Address 205 Green Vista Drive

City

Pittsburgh

State

PA

Zip Code

15237

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 ▼

901.83

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207042

Amount of Each Receipt this Period

78.42

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GAMBOA-PEREZ, SILVIA, , ,

Mailing Address 4855 Seminole Drive

City

San Diego

State

CA

Zip Code

92115

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME CA LOC 3930

Occupation (for Individual)

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
11 / 07 / 2018

Transaction ID : SA11AI.211149

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

223.66

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 412 OF 1411

(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. GAMMON, RYAN, P., ,

Mailing Address 112 S Oak

P.O. Box 185

City

Hoffman

State

IL

Zip Code

62250

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

CORRECTIONAL OFFICER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

395.96

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	5			2	0	1	8		

Transaction ID : SA11AI.208195

Amount of Each Receipt this Period

41.68

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GANDY, YVONNE, M., ,

Mailing Address 986 E 20th Avenue

City

Columbus

State

OH

Zip Code

43211

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
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	8		

Transaction ID : SA11AI.208884

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GANDY, YVONNE, M., ,

Mailing Address 986 E 20th Avenue

City

Columbus

State

OH

Zip Code

43211

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
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

322.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	9			2	0	1	8		

Transaction ID : SA11AI.209515

Amount of Each Receipt this Period

14.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

69.68

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 413 OF 1411

(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. GANDY, YVONNE, M., ,

Mailing Address 986 E 20th Avenue

City
Columbus

State
OH

Zip Code
43211

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 ▼

336.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210156

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GANSEN, LEO, J., ,

Mailing Address 7357 Placid Road

City
Epworth

State
IA

Zip Code
52045

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2018

Transaction ID : SA11AI.211840

Amount of Each Receipt this Period

9.62

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GANSEN, LEO, J., ,

Mailing Address 7357 Placid Road

City
Epworth

State
IA

Zip Code
52045

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.211903

Amount of Each Receipt this Period

9.62

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

33.24

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 414 OF 1411

(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. GARCIA, JENNIFER, R., ,

Mailing Address 2123 Plazuela Vista

City
Santa Fe

State
NM

Zip Code
87505

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

524.82

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206276

Amount of Each Receipt this Period

27.97

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GARCIA, JENNIFER, R., ,

Mailing Address 2123 Plazuela Vista

City
Santa Fe

State
NM

Zip Code
87505

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

552.79

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206643

Amount of Each Receipt this Period

27.97

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GARDNER, CRAIG, M., , JR.

Mailing Address 961 State Park Road

City
Wind Gap

State
PA

Zip Code
18091

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/NSP/LOCAL 1435

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207044

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.94

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 415 OF 1411

(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. GARNETT, KEITH, C., ,

Mailing Address 1304 Crestwood Avenue

City
Columbus

State
OH

Zip Code
43227

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
FINANCIAL ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209516

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GARNETT, KEITH, C., ,

Mailing Address 1304 Crestwood Avenue

City
Columbus

State
OH

Zip Code
43227

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
FINANCIAL ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210157

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GARNIER, KENNETH, W., ,

Mailing Address 2954 Bryant Avenue N.

City
Minneapolis

State
MN

Zip Code
55411

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

412.00

Date of Receipt

11 / 01 / 2018

Transaction ID : SA11AI.211665

Amount of Each Receipt this Period

66.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

84.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 416 OF 1411

(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. GARRISON, RICHARD, B., ,

Mailing Address 818 Meredith Street

 City
 Dayton

 State
 OH

 Zip Code
 45402

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.208886

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GARRISON, RICHARD, B., ,

Mailing Address 818 Meredith Street

 City
 Dayton

 State
 OH

 Zip Code
 45402

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.209517

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GARRISON, RICHARD, B., ,

Mailing Address 818 Meredith Street

 City
 Dayton

 State
 OH

 Zip Code
 45402

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.210158

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 417 OF 1411

(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. GARZA, SELENA, A., ,

Mailing Address 1105 Buckingham Street

City
Sandusky

State
OH

Zip Code
44870

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HOSPITAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210159

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GASPER, JON, A., ,

Mailing Address P.O. Box 4251

City
Honolulu

State
HI

Zip Code
96812-4251

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 152

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.210993

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GASS, MICHAEL, J., ,

Mailing Address 6602 SE Sundancer

City
Pleasant Hill

State
IA

Zip Code
50327

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 18 / 2018

Transaction ID : SA11AI.211841

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

54.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 418 OF 1411

(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. GASS, MICHAEL, J., ,

Mailing Address 6602 SE Sundancer

City

Pleasant Hill

State

IA

Zip Code

50327

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M	D D	Y Y Y Y
10	26	2018

Transaction ID : SA11AI.211904

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GASTON, ALLEN, B., ,

Mailing Address 341 W. Union Road

City

Shelocta

State

PA

Zip Code

15774

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.00

Date of Receipt

M M	D D	Y Y Y Y
10	31	2018

Transaction ID : SA11AI.207045

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GATMAYTAN, VICENTE, , ,

Mailing Address 1212 Jefferson Street SE

City

Olympia

State

WA

Zip Code

98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)

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
11	09	2018

Transaction ID : SA11AI.207604

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

85.00

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 419 OF 1411

(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. GATMAYTAN, VICENTE, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 26 / 2018

Transaction ID : SA11AI.207824

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GATZKE, DUANE, R., ,

Mailing Address 1025 Rose Avenue E

City
Saint Paul

State
MN

Zip Code
55106

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 01 / 2018

Transaction ID : SA11AI.211666

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GEARLLACH, ROSS, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.207605

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

40.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 420 OF 1411
(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. GEARLLACH, ROSS, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
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
11 / 26 / 2018

Transaction ID : SA11AI.207825

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GEHLBACH, ROBERT, C., ,

Mailing Address 3999 Rauch Street

City
HarrisburgState
PAZip Code
17109FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.207046

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GEORGE, JENNIFER, , ,

Mailing Address 201 North 36th Street

City
Camp HillState
PAZip Code
17011FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1182.20

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207047

Amount of Each Receipt this Period

102.80

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

152.80

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GEORGE, KIMBERLY, D., ,

Mailing Address 1099 Vine Street

City
Nanty GloState
PAZip Code
15943FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.79

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			08			2018					

Transaction ID : SA11AI.207048

Amount of Each Receipt this Period

54.84

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GERMAN, CATHY, , ,Mailing Address 11801 Rockville Pike
Apt. 1705City
RockvilleState
MDZip Code
20852FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
FIELD AUDITOR III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1054.64

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			31			2018					

Transaction ID : SA11AI.206277

Amount of Each Receipt this Period

53.05

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GERMAN, CATHY, , ,Mailing Address 11801 Rockville Pike
Apt. 1705City
RockvilleState
MDZip Code
20852FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
FIELD AUDITOR III

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1107.69

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			15			2018					

Transaction ID : SA11AI.206644

Amount of Each Receipt this Period

53.05

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

160.94

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 422 OF 1411
(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. GEYER, CHRISTOPHER, L., ,

Mailing Address 7394 Timothy Street

City

North Ridgeville

State

OH

Zip Code

44039

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 ▼

594.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	6		2	0	1	8

Transaction ID : SA11AI.208888

Amount of Each Receipt this Period

27.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GEYER, CHRISTOPHER, L., ,

Mailing Address 7394 Timothy Street

City

North Ridgeville

State

OH

Zip Code

44039

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 ▼

621.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	9		2	0	1	8

Transaction ID : SA11AI.209519

Amount of Each Receipt this Period

27.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GEYER, CHRISTOPHER, L., ,

Mailing Address 7394 Timothy Street

City

North Ridgeville

State

OH

Zip Code

44039

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 ▼

648.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	3		2	0	1	8

Transaction ID : SA11AI.210160

Amount of Each Receipt this Period

27.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

81.00

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 423 OF 1411

(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. GHEE, ATONDIRA, L., ,

Mailing Address 1761 Woodcrest Road

 City
 Columbus

 State
 OH

 Zip Code
 43232

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 FINANCIAL ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.208889

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GHEE, ATONDIRA, L., ,

Mailing Address 1761 Woodcrest Road

 City
 Columbus

 State
 OH

 Zip Code
 43232

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 FINANCIAL ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209520

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GHEE, ATONDIRA, L., ,

Mailing Address 1761 Woodcrest Road

 City
 Columbus

 State
 OH

 Zip Code
 43232

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 FINANCIAL ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210161

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 424 OF 1411

(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. GIBBS, THOMAS, , ,

Mailing Address 152 Upper Clear Road

City
Claysburg

State
PA

Zip Code
16625

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 ▼

556.64

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207049

Amount of Each Receipt this Period

60.74

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GIBELYOU, CRAIG, W., ,

Mailing Address 10905 132nd Street E

City
Puyallup

State
WA

Zip Code
98374

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 25 / 2018

Transaction ID : SA11AI.207405

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GIBELYOU, CRAIG, W., ,

Mailing Address 10905 132nd Street E

City
Puyallup

State
WA

Zip Code
98374

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207606

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.74

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 425 OF 1411

(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. GIBELYOU, CRAIG, W., ,

Mailing Address 10905 132nd Street E

City
PuyallupState
WAZip Code
98374FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	26	2018

Transaction ID : SA11AI.207826

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GIBSON, MATTHEW, G., ,

Mailing Address 5258 Genoa Farms Blvd.

City
WestervilleState
OHZip Code
43082FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
DISABILITY CLAIMS CORD.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.208890

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GIBSON, MATTHEW, G., ,

Mailing Address 5258 Genoa Farms Blvd.

City
WestervilleState
OHZip Code
43082FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
DISABILITY CLAIMS CORD.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209521

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

45.00

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 426 OF 1411

(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. GIBSON, MATTHEW, G., ,

Mailing Address 5258 Genoa Farms Blvd.

City

Westerville

State

OH

Zip Code

43082

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

DISABILITY CLAIMS CORD.

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210162

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GIBSON, RONDA, R., ,

Mailing Address 4535 Cynthia Drive

City

Enon

State

OH

Zip Code

45323

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

ACCOUNTANT/EXAMINER

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208891

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GIBSON, RONDA, R., ,

Mailing Address 4535 Cynthia Drive

City

Enon

State

OH

Zip Code

45323

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

ACCOUNTANT/EXAMINER

Receipt For:

☐ Primary☐ General☐ Other (specify)

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209522

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

36.00

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 427 OF 1411

(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. GIBSON, RONDA, R., ,

Mailing Address 4535 Cynthia Drive

City
Enon

State
OH

Zip Code
45323

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ACCOUNTANT/EXAMINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210163

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GIBSON, STEPHEN, , ,

Mailing Address 146 David Drive
Apt. E-9

City
Elyria

State
OH

Zip Code
44035

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 ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210164

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GIBSON, VITA, E., ,

Mailing Address 6525 Roselawn Avenue

City
Reynoldsburg

State
OH

Zip Code
43068

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ACCOUNTANT/EXAMINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208893

Amount of Each Receipt this Period

12.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

34.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 428 OF 1411

(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. GIBSON, VITA, E., ,

Mailing Address 6525 Roselawn Avenue

City

Reynoldsburg

State

OH

Zip Code

43068

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

ACCOUNTANT/EXAMINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.50

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209524

Amount of Each Receipt this Period

12.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GIBSON, VITA, E., ,

Mailing Address 6525 Roselawn Avenue

City

Reynoldsburg

State

OH

Zip Code

43068

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

ACCOUNTANT/EXAMINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210165

Amount of Each Receipt this Period

12.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GILES, DARIUS, R., ,

Mailing Address 6707 Quail Avenue N

City

Minneapolis

State

MN

Zip Code

55429

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	01	2018

Transaction ID : SA11AI.211667

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

55.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 429 OF 1411

(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. GILLESPIE, CARLA, , ,

Mailing Address 608 Blair Street

City
Alton

State
IL

Zip Code
62002

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

762.79

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208196

Amount of Each Receipt this Period

76.28

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GILLIAM, DOROTHY, L., ,

Mailing Address 1216 Waterford Drive

City

District Heights

State

MD

Zip Code

20747

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
EXECUTIVE OFFICE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1364.20

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206278

Amount of Each Receipt this Period

64.51

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GILLIAM, DOROTHY, L., ,

Mailing Address 1216 Waterford Drive

City

District Heights

State

MD

Zip Code

20747

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
EXECUTIVE OFFICE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1428.71

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206645

Amount of Each Receipt this Period

64.51

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

205.30

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 430 OF 1411

(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. GILLIAM, MERCELLE, , ,

Mailing Address 5232 Saddle Mountain Way

City
AntiochState
CAZip Code
94531FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ADMINISTRATIVE ASSISTANT II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2018

Transaction ID : SA11AI.206279

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GILLIAM, MERCELLE, , ,

Mailing Address 5232 Saddle Mountain Way

City
AntiochState
CAZip Code
94531FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ADMINISTRATIVE ASSISTANT II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2018

Transaction ID : SA11AI.206646

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GILMORE, DENISE, , ,Mailing Address 190 W. Ostend Street
Suite 101City
BaltimoreState
MDZip Code
21230FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MD CN 3

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

245.16

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2018

Transaction ID : SA11AI.211316

Amount of Each Receipt this Period

62.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

84.50

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
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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GILMORE, LIZA, M., ,

Mailing Address 808 W Main Street

City
NORRISTOWN

State
PA

Zip Code
19401

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)
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
10 / 31 / 2018

Transaction ID : SA11AI.207050

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GILMORE, LORI, A., ,

Mailing Address 5034 Breezeway Drive

City
Toledo

State
OH

Zip Code
43613

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 ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209525

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GILMORE, LORI, A., ,

Mailing Address 5034 Breezeway Drive

City
Toledo

State
OH

Zip Code
43613

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 ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210166

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

38.00

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GIMA, HARRY, Y., ,

Mailing Address 1374 Mailani Street

City
Hilo

State
HI

Zip Code
96720

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 152

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211040

Amount of Each Receipt this Period

20.85

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GINTER, ROBERT, P., , II

Mailing Address 125 Jacksonville Road

City
Homer City

State
PA

Zip Code
15748

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)
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
10 / 31 / 2018

Transaction ID : SA11AI.207051

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GIRTMAN, MELVIN, D., ,

Mailing Address 419 Shepard Road

City
Mansfield

State
OH

Zip Code
44907

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 ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209526

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

49.85

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GIRTMAN, MELVIN, D., ,

Mailing Address 419 Shepard Road

City
MansfieldState
OHZip Code
44907FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210167

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GITCHOFF, CATHERINE, , ,

Mailing Address 196 Esquire Drive

City
Granite CityState
ILZip Code
62040FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
SECRETARY III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

382.52

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208197

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GIZZARELLI, RONALD, , ,

Mailing Address 1625 L Street NW

City
WashingtonState
DCZip Code
20036FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L/STATE STREETOccupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	02	2018

Transaction ID : SA11AI.206647

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

149.00

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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☒ 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GLADDEN, JASMINE, R., ,

Mailing Address 4930 Temple Hill Road

City

Temple Hills

State

MD

Zip Code

20748

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

CUSTOMER SERVICE REPRESENTA

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

361.62

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206280

Amount of Each Receipt this Period

18.81

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GLADDEN, JASMINE, R., ,

Mailing Address 4930 Temple Hill Road

City

Temple Hills

State

MD

Zip Code

20748

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

CUSTOMER SERVICE REPRESENTA

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

380.43

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206648

Amount of Each Receipt this Period

18.81

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GLADSON, LORI, J., ,

Mailing Address 4222 Fairview Drive

City

Bartonville

State

IL

Zip Code

61607

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

HUMAN SERVICES CASEWORKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

457.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208198

Amount of Each Receipt this Period

58.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

95.62

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GLASBY, BERNARD, A., ,

Mailing Address 1222 Norwood Street

City
Brainerd

State
MN

Zip Code
56401

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.15

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211668

Amount of Each Receipt this Period

20.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GLENN, ROBERT, , ,

Mailing Address 23951 Lake Shore Blvd.
Apt. 810

City
Euclid

State
OH

Zip Code
44123

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 ▼

341.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208896

Amount of Each Receipt this Period

15.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GLENN, ROBERT, , ,

Mailing Address 23951 Lake Shore Blvd.
Apt. 810

City
Euclid

State
OH

Zip Code
44123

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 ▼

356.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209527

Amount of Each Receipt this Period

15.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

51.30

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GLENN, ROBERT, , ,

Mailing Address 23951 Lake Shore Blvd.
Apt. 810

City State Zip Code
Euclid OH 44123

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 ▼

372.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210168

Amount of Each Receipt this Period

15.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GLUMM, ANTHONY, T., ,

Mailing Address 403 W Jenny Street

City State Zip Code
Bay City MI 48706

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MI CN 25/GENESEE COUNTY

Occupation (for Individual)
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
10 / 18 / 2018

Transaction ID : SA11AI.211356

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GLUMM, ANTHONY, T., ,

Mailing Address 403 W Jenny Street

City State Zip Code
Bay City MI 48706

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MI CN 25/GENESEE COUNTY

Occupation (for Individual)
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
10 / 22 / 2018

Transaction ID : SA11AI.211362

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

35.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GLUMM, ANTHONY, T., ,

Mailing Address 403 W Jenny Street

City

Bay City

State

MI

Zip Code

48706

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MI CN 25/GENESEE COUNTY

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.211363

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GLUMM, ANTHONY, T., ,

Mailing Address 403 W Jenny Street

City

Bay City

State

MI

Zip Code

48706

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MI CN 25/GENESEE COUNTY

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2018

Transaction ID : SA11AI.211384

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GODFREY, ALFREDA, R., ,

Mailing Address 3099 E 5th Avenue

City

Columbus

State

OH

Zip Code

43219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

THERAPUTIC PROGRAM WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210169

Amount of Each Receipt this Period

8.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

28.50

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GOGOE, CONSTANCE, , ,

Mailing Address 190 W. Ostend Street
Suite 101

City
Baltimore

State
MD

Zip Code
21230

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MD CN 3

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 19 / 2018

Transaction ID : SA11AI.211317

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GOLIAN, PATRICIA, S., ,

Mailing Address 11855 Gross Drive

City
Parma

State
OH

Zip Code
44130

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HEALTH INFORMATION T

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208898

Amount of Each Receipt this Period

9.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GOLIAN, PATRICIA, S., ,

Mailing Address 11855 Gross Drive

City
Parma

State
OH

Zip Code
44130

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HEALTH INFORMATION T

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

218.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209529

Amount of Each Receipt this Period

9.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

59.00

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GOLIAN, PATRICIA, S., ,

Mailing Address 11855 Gross Drive

City
ParmaState
OHZip Code
44130FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
HEALTH INFORMATION T

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210170

Amount of Each Receipt this Period

9.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GOLKA, JOSHUA, , ,

Mailing Address 2256 Highrail Way

City
RosevilleState
CAZip Code
95747FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
LEGISLATION MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1053.07

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206281

Amount of Each Receipt this Period

39.99

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GOMES, JANET, E., ,

Mailing Address P.O. Box 20893

City
Castro ValleyState
CAZip Code
94546FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA CN 57Occupation (for Individual)
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 Y
10 / 24 / 2018

Transaction ID : SA11AI.211231

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

89.49

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GONZALEZ, ALMA, , ,

Mailing Address 1516 S Trask Street

City
Tampa

State
FL

Zip Code
33629

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L/STATE STREET

Occupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 02 / 2018

Transaction ID : SA11AI.206649

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GONZALEZ, JESSE, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
10 / 25 / 2018

Transaction ID : SA11AI.207406

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GONZALEZ, JESSE, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207607

Amount of Each Receipt this Period

10.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

41.00

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GONZALEZ, JESSE, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF 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
11 / 26 / 2018

Transaction ID : SA11AI.207827

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GONZALEZ, LAURA, A., ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
10 / 25 / 2018

Transaction ID : SA11AI.207407

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GONZALEZ, LAURA, A., ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207608

Amount of Each Receipt this Period

10.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

31.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 442 OF 1411

(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. GONZALEZ, LAURA, A., ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF 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
11 / 26 / 2018

Transaction ID : SA11AI.207828

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GOOD, TERRY, D., ,

Mailing Address 7659 Walnut Creek Road

City
Kingston

State
OH

Zip Code
45644

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 ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208899

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GOOD, TERRY, D., ,

Mailing Address 7659 Walnut Creek Road

City
Kingston

State
OH

Zip Code
45644

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 ▼

322.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209530

Amount of Each Receipt this Period

14.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

38.50

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. **GOOD, TERRY, D., ,**

Mailing Address 7659 Walnut Creek Road

City
Kingston

State
OH

Zip Code
45644

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 ▼

336.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210171

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **GOODING, MITCHELL, R., ,**

Mailing Address 860 Richie Avenue

City
Lima

State
OH

Zip Code
45801

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 ▼

385.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208900

Amount of Each Receipt this Period

17.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **GOODING, MITCHELL, R., ,**

Mailing Address 860 Richie Avenue

City
Lima

State
OH

Zip Code
45801

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 ▼

402.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209531

Amount of Each Receipt this Period

17.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

49.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GOODING, MITCHELL, R., ,

Mailing Address 860 Richie Avenue

City
LimaState
OHZip Code
45801FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210172

Amount of Each Receipt this Period

17.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GOODMAN, GREGORY, W., ,

Mailing Address 174 Hemlock Drive

City
ElyriaState
OHZip Code
44035FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210173

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GOODMAN, PHILLIP, C., ,

Mailing Address 10 Lakeview Road

City
TaylorvilleState
ILZip Code
62568FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

690.41

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208199

Amount of Each Receipt this Period

69.04

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

95.04

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 445 OF 1411

(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. GORE, THORNE, , ,

Mailing Address 670 Turney Road
#6

City
Bedford

State
OH

Zip Code
44146

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209533

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GORE, THORNE, , ,

Mailing Address 670 Turney Road
#6

City
Bedford

State
OH

Zip Code
44146

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210174

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GORSKI, GARY, C., ,

Mailing Address 730 11th Street NE
Apt. 402

City
Washington

State
DC

Zip Code
20002

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
LABOR ECONOMIST II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

787.28

Date of Receipt

10 / 31 / 2018

Transaction ID : SA11AI.206282

Amount of Each Receipt this Period

36.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

54.33

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GORSKI, GARY, C., ,

Mailing Address 730 11th Street NE
Apt. 402

City
Washington

State
DC

Zip Code
20002

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
LABOR ECONOMIST II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

823.61

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206650

Amount of Each Receipt this Period

36.33

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GOSHAY, ZANDER, , ,

Mailing Address 826 Inwood Place

City
Columbus

State
OH

Zip Code
43224

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
AIR QUALITY TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208903

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GOSHAY, ZANDER, , ,

Mailing Address 826 Inwood Place

City
Columbus

State
OH

Zip Code
43224

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
AIR QUALITY TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

322.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209534

Amount of Each Receipt this Period

14.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

64.33

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
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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. GOSHAY, ZANDER, , ,

Mailing Address 826 Inwood Place

City
Columbus

State
OH

Zip Code
43224

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
AIR QUALITY TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210175

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GOUIN, DANA, M., ,

Mailing Address 9121 Knox Court

City
Laurel

State
MD

Zip Code
20723

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
SUPPORT STAFF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

827.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206283

Amount of Each Receipt this Period

41.38

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GOUIN, DANA, M., ,

Mailing Address 9121 Knox Court

City
Laurel

State
MD

Zip Code
20723

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
SUPPORT STAFF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

868.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206651

Amount of Each Receipt this Period

41.38

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

96.76

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GOULD, TAMMY, A., ,

Mailing Address P.O. Box 844

City
ColeraineState
MNZip Code
55722FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MNOccupation (for Individual)
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
11			01			2018			

Transaction ID : SA11AI.211669

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GRABEL, JOHN, S., ,

Mailing Address 563 Park Lane

City
MadisonState
WIZip Code
53711FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
POLITICAL ACTION REP II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1022.40

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2018			

Transaction ID : SA11AI.206284

Amount of Each Receipt this Period

51.63

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GRABEL, JOHN, S., ,

Mailing Address 563 Park Lane

City
MadisonState
WIZip Code
53711FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
POLITICAL ACTION REP II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1074.03

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2018			

Transaction ID : SA11AI.206652

Amount of Each Receipt this Period

51.63

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

123.26

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

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GRABER, KERRY, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 25 / 2018

Transaction ID : SA11AI.207408

Amount of Each Receipt this Period

25.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GRABER, KERRY, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207609

Amount of Each Receipt this Period

25.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GRABER, KERRY, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

561.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207829

Amount of Each Receipt this Period

25.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

76.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 450 OF 1411

(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. GRAEFEN, BARBARA, A., ,

Mailing Address 33583 E 3100 N Road

City
DwightState
ILZip Code
60420FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
MENTAL HEALTH TECH I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.60

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208200

Amount of Each Receipt this Period

65.52

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GRAHAM, ADRIAN, L., ,

Mailing Address 2258 Hinde Road

City
ToledoState
OHZip Code
43607FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209535

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GRAHAM, ADRIAN, L., ,

Mailing Address 2258 Hinde Road

City
ToledoState
OHZip Code
43607FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210176

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

83.52

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 451 OF 1411

(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. GRAHAM, CHERYL, F., ,

Mailing Address 1931 Hervey Avenue

City

North Chicago

State

IL

Zip Code

60064

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

MENTAL HEALTH TECH I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.82

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2018			

Transaction ID : SA11AI.208201

Amount of Each Receipt this Period

31.26

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GRAHAM, STEPHEN, M., ,Mailing Address 7707 Wisconsin Avenue
Apt. 529

City

Bethesda

State

MD

Zip Code

20814

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ASSOCIATE DIRECTOR, ACCOUNTIN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1254.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2018			

Transaction ID : SA11AI.206285

Amount of Each Receipt this Period

62.71

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GRAHAM, STEPHEN, M., ,Mailing Address 7707 Wisconsin Avenue
Apt. 529

City

Bethesda

State

MD

Zip Code

20814

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ASSOCIATE DIRECTOR, ACCOUNTIN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1316.91

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2018			

Transaction ID : SA11AI.206653

Amount of Each Receipt this Period

62.71

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

156.68

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 452 OF 1411

(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. GRAMMER, JERRY, W., ,

Mailing Address 65 Hansen Way

City
Murphysboro

State
IL

Zip Code
62966

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
CORRECTIONS SERGEANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.12

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208202

Amount of Each Receipt this Period

41.68

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GRANT, TYRONE, L., ,

Mailing Address 5805 Maple Tree Lane

City
Columbus

State
OH

Zip Code
43232

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ODJFS CUSTOMER SERVICE REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210177

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GRAVES, JANICE, Y., ,

Mailing Address 8616 S Dorchester

City
Chicago

State
IL

Zip Code
60619

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
LABORATORY QUALITY SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208203

Amount of Each Receipt this Period

125.01

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.19

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GRAY, CYNTHIA, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.207610

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GRAY, CYNTHIA, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	26	2018

Transaction ID : SA11AI.207830

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GRAY, HIRAM, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.207611

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 454 OF 1411

(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. GRAY, HIRAM, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 26 / 2018

Transaction ID : SA11AI.207831

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GRAY, MONIQUE, L., ,

Mailing Address 11414 Nelson Avenue

City
Cleveland

State
OH

Zip Code
44105

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
THERAPUTIC PROGRAM WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209537

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GRAY, MONIQUE, L., ,

Mailing Address 11414 Nelson Avenue

City
Cleveland

State
OH

Zip Code
44105

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
THERAPUTIC PROGRAM WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210178

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

28.00

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GRAYSON, R. SEAN, , ,

Mailing Address 10201 Galena Pointe Drive

City
Galena

State
OH

Zip Code
43021

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH CN 8

Occupation (for Individual)

GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1259.10

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210892

Amount of Each Receipt this Period

114.98

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GREBNER, JONATHAN, , ,

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 (for Individual)

AFSCME MN CN 5/CN14

Occupation (for Individual)

POLITICAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

940.54

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211670

Amount of Each Receipt this Period

125.86

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GREEN, DOUGLAS, A., ,

Mailing Address 405 Colton Avenue

City
Bellefontaine

State
OH

Zip Code
43311

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

AUTOMOTIVE MECHANIC TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208907

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.84

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 456 OF 1411

(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. GREEN, DOUGLAS, A., ,

Mailing Address 405 Colton Avenue

City
Bellefontaine

State
OH

Zip Code
43311

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
AUTOMOTIVE MECHANIC TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209538

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GREEN, DOUGLAS, A., ,

Mailing Address 405 Colton Avenue

City
Bellefontaine

State
OH

Zip Code
43311

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
AUTOMOTIVE MECHANIC TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210179

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GREEN, FLETCHER, L., , JR.

Mailing Address 717 MacMillan Drive

City
Dayton

State
OH

Zip Code
45426

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/DAYTON METROHEALTH

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

221.03

Date of Receipt

10 / 23 / 2018

Transaction ID : SA11AI.210802

Amount of Each Receipt this Period

9.61

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

29.61

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 457 OF 1411

(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. GREEN, FLETCHER, L., , JR.

Mailing Address 717 MacMillan Drive

City
Dayton

State
OH

Zip Code
45426

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/DAYTON METROHEALTH

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.64

Date of Receipt

11 / 06 / 2018

Transaction ID : SA11AI.210803

Amount of Each Receipt this Period

9.61

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GREEN, FLETCHER, L., , JR.

Mailing Address 717 MacMillan Drive

City
Dayton

State
OH

Zip Code
45426

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/DAYTON METROHEALTH

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.25

Date of Receipt

11 / 21 / 2018

Transaction ID : SA11AI.210893

Amount of Each Receipt this Period

9.61

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GREEN, FRANKLIN, , , JR.

Mailing Address 3846 Hickwood Creek Drive

City
High Point

State
NC

Zip Code
27265

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

974.40

Date of Receipt

10 / 31 / 2018

Transaction ID : SA11AI.206286

Amount of Each Receipt this Period

41.67

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.89

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee 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. GREEN, FRANKLIN, , , JR.

Mailing Address 3846 Hickwood Creek Drive

City
High PointState
NCZip Code
27265FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1016.07

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2018

Transaction ID : SA11AI.206654

Amount of Each Receipt this Period

41.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GREEN, TIMOTHY, J., ,

Mailing Address 4472 Algire Road

City
MansfieldState
OHZip Code
44904FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210180

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GREENE, FRANKLIN, , ,

Mailing Address 3709 Darcey Lane

City
FlintState
MIZip Code
48506-5001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L/STATE STREETOccupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2018

Transaction ID : SA11AI.206655

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

75.17

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 459 OF 1411

(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. GREENE, SCOTT, C., ,

Mailing Address 23 Weaver Way

City

North Lewisburg

State

OH

Zip Code

43060

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 ▼

319.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208909

Amount of Each Receipt this Period

14.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GREENE, SCOTT, C., ,

Mailing Address 23 Weaver Way

City

North Lewisburg

State

OH

Zip Code

43060

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 ▼

333.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209540

Amount of Each Receipt this Period

14.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GREENE, SCOTT, C., ,

Mailing Address 23 Weaver Way

City

North Lewisburg

State

OH

Zip Code

43060

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 ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210181

Amount of Each Receipt this Period

14.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

43.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GREGORY, MARIA, G., ,

Mailing Address 39 Greentree Street

City

Beardstown

State

IL

Zip Code

62618

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

SOCIAL SERV PROGRAM REP

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M	D D	Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208204

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GRETSUK, STEVE, , ,

Mailing Address 7803 Desiree Street

City

Alexandria

State

VA

Zip Code

22315

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

DIRECTOR, INFORMATION SERVICE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

3719.40

Date of Receipt

M M	D D	Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206288

Amount of Each Receipt this Period

180.47

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GRETSUK, STEVE, , ,

Mailing Address 7803 Desiree Street

City

Alexandria

State

VA

Zip Code

22315

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

DIRECTOR, INFORMATION SERVICE

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

3899.87

Date of Receipt

M M	D D	Y Y Y Y
11	15	2018

Transaction ID : SA11AI.206657

Amount of Each Receipt this Period

180.47

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

390.94

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GRIFFIN, DAVID, A., ,

Mailing Address 2222 N Hadley Road

City
Springfield

State
OH

Zip Code
45505

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208910

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GRIFFIN, DAVID, A., ,

Mailing Address 2222 N Hadley Road

City
Springfield

State
OH

Zip Code
45505

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 ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209541

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GRIFFIN, DAVID, A., ,

Mailing Address 2222 N Hadley Road

City
Springfield

State
OH

Zip Code
45505

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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210182

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

30.00

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GRIFFIN, KIMBERLY, , ,

Mailing Address 2456 Five Fathom Circle

City
Woodbridge

State
VA

Zip Code
22192

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ADMINISTRATIVE ASSISTANT II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

872.60

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206289

Amount of Each Receipt this Period

41.38

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GRIFFIN, KIMBERLY, , ,

Mailing Address 2456 Five Fathom Circle

City
Woodbridge

State
VA

Zip Code
22192

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ADMINISTRATIVE ASSISTANT II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

913.98

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206658

Amount of Each Receipt this Period

41.38

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GRIFFIN, YVONNE, , ,

Mailing Address 1075 E 145th Street

City
Cleveland

State
OH

Zip Code
44110

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH CN 8/CLEVELAND

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

202.02

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 22 / 2018

Transaction ID : SA11AI.210804

Amount of Each Receipt this Period

9.62

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

92.38

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GRIFFIN, YVONNE, , ,

Mailing Address 1075 E 145th Street

 City
 Cleveland

 State
 OH

 Zip Code
 44110

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH CN 8/CLEVELAND

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.210894

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GRIFFITH, SUZANNE, L, ,

Mailing Address 10 El Pardo Court

 City
 Martinez

 State
 CA

 Zip Code
 94553

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME CA CN 57

 Occupation (for Individual)
 BUSINESS AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.211232

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GRIFFITHS, KATHY, A., ,

Mailing Address 736 Griffith Road

 City
 Hastings

 State
 PA

 Zip Code
 16646

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME PA CN 13/STATE OF PA

 Occupation (for Individual)
 CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.207202

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GRIMES, LYLE, B, ,

Mailing Address 9503 Emery Hill Drive

City
SugarlandState
TXZip Code
77498FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
ORGANIZER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

831.76

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206290

Amount of Each Receipt this Period

41.95

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GRIMES, LYLE, B, ,

Mailing Address 9503 Emery Hill Drive

City
SugarlandState
TXZip Code
77498FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
ORGANIZER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

873.71

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	15	2018

Transaction ID : SA11AI.206659

Amount of Each Receipt this Period

41.95

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GRIMES, WILLIAM, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.207612

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

93.90

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GRIMES, WILLIAM, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2018

Transaction ID : SA11AI.207833

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GROHE, PEGGY, A., ,

Mailing Address 9707 Berlin Road

City

Berlin Heights

State

OH

Zip Code

44814

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
HOSPITAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.209542

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GROHE, PEGGY, A., ,

Mailing Address 9707 Berlin Road

City

Berlin Heights

State

OH

Zip Code

44814

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
HOSPITAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210183

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

28.00

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GROOMS, HEATHER, L., ,

Mailing Address 302 Forest Hills Drive

City
Huron

State
OH

Zip Code
44839

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HOSPITAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209543

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GROOMS, HEATHER, L., ,

Mailing Address 302 Forest Hills Drive

City
Huron

State
OH

Zip Code
44839

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HOSPITAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210184

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GROSS, HAROLD, E., ,

Mailing Address 340 South Daves Street

City
Madisonville

State
KY

Zip Code
42431

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ORGANIZER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

668.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206291

Amount of Each Receipt this Period

33.79

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

51.79

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GROSS, HAROLD, E., ,

Mailing Address 340 South Daves Street

City
Madisonville

State
KY

Zip Code
42431

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ORGANIZER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

702.36

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206660

Amount of Each Receipt this Period

33.79

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GROSS, SARA, K., ,

Mailing Address 2601 Ol'Wishpering Pines SW

City
Bemidji

State
MN

Zip Code
56601

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
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
11 / 01 / 2018

Transaction ID : SA11AI.211671

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GRUBAUGH, KATHRYN, M., ,

Mailing Address 809 W Sugar Street

City
Mount Vernon

State
OH

Zip Code
43050

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
THERAPUTIC PROGRAM WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208913

Amount of Each Receipt this Period

12.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.79

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 468 OF 1411

(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. GRUBAUGH, KATHRYN, M., ,

Mailing Address 809 W Sugar Street

City

Mount Vernon

State

OH

Zip Code

43050

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

THERAPUTIC PROGRAM WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.209544

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GRUBAUGH, KATHRYN, M., ,

Mailing Address 809 W Sugar Street

City

Mount Vernon

State

OH

Zip Code

43050

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

THERAPUTIC PROGRAM WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210185

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GRUBB, KENNETH, , ,

Mailing Address 2208 Capitol Way S

City

Olympia

State

WA

Zip Code

98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2018

Transaction ID : SA11AI.207412

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

44.00

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 469 OF 1411

(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. GRUBB, KENNETH, , ,

Mailing Address 2208 Capitol Way S

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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 Y
11 / 09 / 2018

Transaction ID : SA11AI.207613

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GRUBB, KENNETH, , ,

Mailing Address 2208 Capitol Way S

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207834

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GUERCIO, MELISSA, D., ,

Mailing Address 324 E Parson Street

City
Galion

State
OH

Zip Code
44833

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HIGHWAY TECHNICIAN II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210186

Amount of Each Receipt this Period

8.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

48.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 470 OF 1411

(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. GUERNSEY, PATRICK, J., ,

Mailing Address 961 Tuscarora Avenue

City
St. Paul

State
MN

Zip Code
55102

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/HENNEPIN COUNTY

Occupation (for Individual)
CORRECITONS OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

921.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211672

Amount of Each Receipt this Period

162.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GUERTIN, JENNIFER, , ,

Mailing Address 1053 Hatch Avenue

City
St. Paul

State
MN

Zip Code
55103

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/ST. PAUL CITY

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

561.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211673

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GUESS, JOAN, , ,

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 (for Individual)
AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)
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 Y
10 / 18 / 2018

Transaction ID : SA11AI.211842

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

222.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 471 OF 1411
(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. GUESS, JOAN, , ,

Mailing Address 4320 NW Second Avenue

City
Des MoinesState
IAZip Code
50313FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/STATE OF IAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M	D D	Y Y Y Y
10	26	2018

Transaction ID : SA11AI.211905

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GUETHLEIN, CONNIE, M., ,

Mailing Address 7379 Pickway Drive

City
CincinnatiState
OHZip Code
45233FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ENGINEERING CLERK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.00

Date of Receipt

M M	D D	Y Y Y Y
10	26	2018

Transaction ID : SA11AI.208915

Amount of Each Receipt this Period

13.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GUETHLEIN, CONNIE, M., ,

Mailing Address 7379 Pickway Drive

City
CincinnatiState
OHZip Code
45233FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ENGINEERING CLERK

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

310.50

Date of Receipt

M M	D D	Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209546

Amount of Each Receipt this Period

13.50

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

47.00

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 472 OF 1411

(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. GUETHLEIN, CONNIE, M., ,

Mailing Address 7379 Pickway Drive

City
Cincinnati

State
OH

Zip Code
45233

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ENGINEERING CLERK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210187

Amount of Each Receipt this Period

13.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GUEVARA, ROXANA, E., ,

Mailing Address 13328 Rockenbach Street

City
Baldwin Park

State
CA

Zip Code
91706

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

740.07

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206292

Amount of Each Receipt this Period

38.68

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GUEVARA, ROXANA, E., ,

Mailing Address 13328 Rockenbach Street

City
Baldwin Park

State
CA

Zip Code
91706

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

778.75

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206661

Amount of Each Receipt this Period

38.68

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.86

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 473 OF 1411

(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. GUILFOIL, ELENA, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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 Y
10 / 25 / 2018

Transaction ID : SA11AI.207413

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GUILFOIL, ELENA, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207614

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GUILFOIL, ELENA, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207835

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 474 OF 1411

(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. GUMP, JOSEPH, M., ,

Mailing Address 429 MacBain Way

City
Inverness

State
IL

Zip Code
60010

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
ASSISTANT PUBLIC DEFD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.06

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 18 / 2018

Transaction ID : SA11AI.210766

Amount of Each Receipt this Period

41.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GUMP, JOSEPH, M., ,

Mailing Address 429 MacBain Way

City
Inverness

State
IL

Zip Code
60010

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
ASSISTANT PUBLIC DEFD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.40

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208205

Amount of Each Receipt this Period

83.34

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GUTIERREZ, LORETTA, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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 Y
10 / 25 / 2018

Transaction ID : SA11AI.207414

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

140.01

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 475 OF 1411

(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. GUTIERREZ, LORETTA, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207615

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GUTIERREZ, LORETTA, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207836

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GUTZKI, JOEL, L., ,

Mailing Address 5250 Sleight Road

City
Bath

State
MI

Zip Code
48808

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
FIELD COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1235.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206293

Amount of Each Receipt this Period

58.13

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

88.13

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 476 OF 1411

(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. GUTZKI, JOEL, L., ,

Mailing Address 5250 Sleight Road

City
BathState
MIZip Code
48808FEC ID number of contributing
federal political committee.

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

FIELD COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2018

Transaction ID : SA11AI.206662

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GUZYNSKI, JOSEPH, M., ,
Mailing Address 2543 Cornelia Trail
Unit J

City

Woodbury

State

MN

Zip Code

55125

FEC ID number of contributing
federal political committee.

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2018

Transaction ID : SA11AI.206294

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GUZYNSKI, JOSEPH, M., ,
Mailing Address 2543 Cornelia Trail
Unit J

City

Woodbury

State

MN

Zip Code

55125

FEC ID number of contributing
federal political committee.

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2018

Transaction ID : SA11AI.206663

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 477 OF 1411

(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. GWYNNE, JON, A., ,

Mailing Address 2052 Sherwood Lake Drive

City
ScherevilleState
INZip Code
46375FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

572.61

Date of Receipt

M M	D D	Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208206

Amount of Each Receipt this Period

57.26

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAAS, DOREEN, D., ,

Mailing Address 630 Maris Street

City
PhiladelphiaState
PAZip Code
19128FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.00

Date of Receipt

M M	D D	Y Y Y Y
10	31	2018

Transaction ID : SA11AI.207052

Amount of Each Receipt this Period

22.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HACHI, MADAR, A., ,Mailing Address 16 E 19th Street
Apt. 107City
MinneapolisState
MNZip Code
55403FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MNOccupation (for Individual)
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
11	01	2018

Transaction ID : SA11AI.211674

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

109.26

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

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HACKER, CHARLIE, M., ,

Mailing Address 1218 State Route 245 W

City

West Liberty

State

OH

Zip Code

43357

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 SERGEANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208916

Amount of Each Receipt this Period

9.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HACKER, CHARLIE, M., ,

Mailing Address 1218 State Route 245 W

City

West Liberty

State

OH

Zip Code

43357

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 SERGEANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209547

Amount of Each Receipt this Period

9.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HACKER, CHARLIE, M., ,

Mailing Address 1218 State Route 245 W

City

West Liberty

State

OH

Zip Code

43357

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 SERGEANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210188

Amount of Each Receipt this Period

9.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

28.50

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
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 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HACKMAN, ABRAM, L., , JR.

Mailing Address 8126 S. Indiana Avenue

 City
 Chicago

 State
 IL

 Zip Code
 60619

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME IL CN 31/STATE OF IL

 Occupation (for Individual)
 ADMIN ASSISTANT II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.210767

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HACKMAN, ABRAM, L., , JR.

Mailing Address 8126 S. Indiana Avenue

 City
 Chicago

 State
 IL

 Zip Code
 60619

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME IL CN 31/STATE OF IL

 Occupation (for Individual)
 ADMIN ASSISTANT II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.208207

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAENEL, JASON, , ,

Mailing Address 57 Rossignol Circle

 City
 Sacramento

 State
 CA

 Zip Code
 95833

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME INT'L

 Occupation (for Individual)
 POLITICAL ACTION REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.206295

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAENEL, JASON, , ,

Mailing Address 57 Rossignol Circle

City
Sacramento

State
CA

Zip Code
95833

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
POLITICAL ACTION REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.59

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206664

Amount of Each Receipt this Period

66.31

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAGEN, LAURA, K., ,

Mailing Address 20857 180th Street

City
New Richland

State
MN

Zip Code
56072

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
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
11 / 01 / 2018

Transaction ID : SA11AI.211675

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAHN, CONNIE, , ,

Mailing Address 501 Aberdeen Drive

City
Middletown

State
OH

Zip Code
45042

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
DELIVERY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208917

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

96.31

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAHN, CONNIE, , ,

Mailing Address 501 Aberdeen Drive

City
Middletown

State
OH

Zip Code
45042

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
DELIVERY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209548

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAHN, CONNIE, , ,

Mailing Address 501 Aberdeen Drive

City
Middletown

State
OH

Zip Code
45042

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
DELIVERY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210189

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAHN, JILL, E., ,

Mailing Address 2311 Upton Avenue N

City
Minneapolis

State
MN

Zip Code
55411

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211676

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

50.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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. HAHS, LANA, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 9 Westgate Drive City Granite City State IL Zip Code 62040 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME IL CN 31/STATE OF IL Occupation (for Individual) 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 Y 11 / 05 / 2018 Transaction ID : SA11AI.208208 Amount of Each Receipt this Period 20.00 ☐ Memo Item
B. HAINES, DONALD, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 451 Walnut Street City Columbia State PA Zip Code 17512 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME PA CN 13/STATE OF PA Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 330.00		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 31 / 2018 Transaction ID : SA11AI.207053 Amount of Each Receipt this Period 30.00 ☐ Memo Item
C. HAINES, JON, N., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 1718 4th Street NW Apt. 1 City Washington State DC Zip Code 20001 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME INT'L Occupation (for Individual) LABOR ECONOMIST I Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 670.48		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 31 / 2018 Transaction ID : SA11AI.206297 Amount of Each Receipt this Period 34.55 ☐ Memo Item
SUBTOTAL of Receipts This Page (optional)..... ▶		84.55
TOTAL This Period (last page this line number only)..... ▶		

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAINES, JON, N., ,Mailing Address 1718 4th Street NW
Apt. 1City
WashingtonState
DCZip Code
20001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
LABOR ECONOMIST I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

705.03

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2018			

Transaction ID : SA11AI.206666

Amount of Each Receipt this Period

34.55

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAINES, PAMELA, A., ,

Mailing Address 12408 Farrington Avenue

City
ClevelandState
OHZip Code
44105FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CLERK III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2018			

Transaction ID : SA11AI.208918

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAINES, PAMELA, A., ,

Mailing Address 12408 Farrington Avenue

City
ClevelandState
OHZip Code
44105FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CLERK III

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			09			2018			

Transaction ID : SA11AI.209549

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

60.55

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAINES, PAMELA, A., ,

Mailing Address 12408 Farrington Avenue

City
ClevelandState
OHZip Code
44105FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CLERK III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210190

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAIRSTON, MONICA, R., ,

Mailing Address 2528 Weyburn Road

City
ColumbusState
OHZip Code
43232FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
FINANCIAL ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.209550

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAIRSTON, MONICA, R., ,

Mailing Address 2528 Weyburn Road

City
ColumbusState
OHZip Code
43232FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
FINANCIAL ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210191

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

31.00

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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☒ 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. HALE, KIMBERLY, A., ,

Mailing Address 2230 Newbury Drive

City

E Cleveland

State

OH

Zip Code

44112

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

WORKERS COMPENSATION CLAIMS

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208920

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HALE, KIMBERLY, A., ,

Mailing Address 2230 Newbury Drive

City

E Cleveland

State

OH

Zip Code

44112

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

WORKERS COMPENSATION CLAIMS

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209551

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HALE, KIMBERLY, A., ,

Mailing Address 2230 Newbury Drive

City

E Cleveland

State

OH

Zip Code

44112

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

WORKERS COMPENSATION CLAIMS

Receipt For:

☐ Primary☐ General☐ Other (specify)

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210192

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

39.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 486 OF 1411
(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. HALL, JANE, E., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 16606 Bealle Hill Road City Waldorf State MD Zip Code 20601 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME INT'L Occupation (for Individual) ADMINISTRATIVE ASSISTANT II Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 1442.60			Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 31 / 2018 Transaction ID : SA11AI.206298 Amount of Each Receipt this Period 41.38 ☐ Memo Item
B. HALL, JANE, E., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 16606 Bealle Hill Road City Waldorf State MD Zip Code 20601 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME INT'L Occupation (for Individual) ADMINISTRATIVE ASSISTANT II Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 1483.98			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 15 / 2018 Transaction ID : SA11AI.206667 Amount of Each Receipt this Period 41.38 ☐ Memo Item
C. HALL, LINDA, L., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 2008 S. 5th Avenue City Maywood State IL Zip Code 60153 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME IL CN 31/STATE OF IL Occupation (for Individual) COOK I Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 441.00			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 05 / 2018 Transaction ID : SA11AI.208209 Amount of Each Receipt this Period 42.00 ☐ Memo Item
SUBTOTAL of Receipts This Page (optional)..... ▶			124.76
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
☐ 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. HALL, SARAH, L., ,

Mailing Address 370 James way

Apt. B

City

Marion

State

OH

Zip Code

43302

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 ▼

207.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209552

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HALL, SARAH, L., ,

Mailing Address 370 James way

Apt. B

City

Marion

State

OH

Zip Code

43302

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 ▼

216.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210193

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HALLBOM, ROBERT, E., ,

Mailing Address 10936 Washington Street

City

Chagrin Falls

State

OH

Zip Code

44023

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

AUTOMOTIVE MECHANIC TECH

Receipt For:

☐ Primary☐ General☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208922

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

28.00

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HALLBOM, ROBERT, E., ,

Mailing Address 10936 Washington Street

City
Chagrin Falls

State
OH

Zip Code
44023

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
AUTOMOTIVE MECHANIC TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209553

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HALLBOM, ROBERT, E., ,

Mailing Address 10936 Washington Street

City
Chagrin Falls

State
OH

Zip Code
44023

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
AUTOMOTIVE MECHANIC TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210194

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HALLIWELL, AUTUMN, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.207616

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HALLIWELL, AUTUMN, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
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
11	26	2018

Transaction ID : SA11AI.207837

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HALLSTROM, CINDY, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
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
10	25	2018

Transaction ID : SA11AI.207416

Amount of Each Receipt this Period

12.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HALLSTROM, CINDY, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

262.50

Date of Receipt

M M	D D	Y Y Y Y
11	09	2018

Transaction ID : SA11AI.207617

Amount of Each Receipt this Period

12.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

35.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HALLSTROM, CINDY, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M	D D	Y Y Y Y
11	26	2018

Transaction ID : SA11AI.207838

Amount of Each Receipt this Period

12.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HALPIN, DANIEL, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
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
11	09	2018

Transaction ID : SA11AI.207618

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HALPIN, DANIEL, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
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
11	26	2018

Transaction ID : SA11AI.207839

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

32.50

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HALVORSON, ERIC, M., ,

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 (for Individual)

AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211677

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAMADA, HELEN, H., ,

Mailing Address 1113 Davenport Street
Unit A3

City

Honolulu

State

HI

Zip Code

96822

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME HI LOC 152

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.210994

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAMEL, KEVIN, , ,

Mailing Address 1212 Jefferson Street SE

City

Olympia

State

WA

Zip Code

98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207619

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

115.00

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
☐ 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. HAMEL, KEVIN, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207840

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAMILL, JOSEPH, F., ,

Mailing Address 1502 West 5th
#H-2City
AustinState
TXZip Code
78703FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
POLITICAL ACTION REP III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206299

Amount of Each Receipt this Period

39.41

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAMILL, JOSEPH, F., ,

Mailing Address 1502 West 5th
#H-2City
AustinState
TXZip Code
78703FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
POLITICAL ACTION REP III

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

879.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206668

Amount of Each Receipt this Period

39.41

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

88.82

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAMILTON, DANIE, , ,

Mailing Address 1417 Basswood Court

City
East Lansing

State
MI

Zip Code
48823

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MI CN 25

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211338

Amount of Each Receipt this Period

12.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAMILTON, DANIE, , ,

Mailing Address 1417 Basswood Court

City
East Lansing

State
MI

Zip Code
48823

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MI CN 25

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 20 / 2018

Transaction ID : SA11AI.211385

Amount of Each Receipt this Period

12.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAMILTON, MARK, D., ,

Mailing Address P.O. Box 6136

City
Olympia

State
WA

Zip Code
98507

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28

Occupation (for Individual)
STRATEGIC COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

990.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2018

Transaction ID : SA11AI.207841

Amount of Each Receipt this Period

90.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

115.00

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAMILTON, ROBERT, E., ,

Mailing Address 11525 Capistrano Circle

City
Indianapolis

State
IN

Zip Code
46236

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
DATABASE ANALYST II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

879.48

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206300

Amount of Each Receipt this Period

45.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAMILTON, ROBERT, E., ,

Mailing Address 11525 Capistrano Circle

City
Indianapolis

State
IN

Zip Code
46236

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
DATABASE ANALYST II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

924.68

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206669

Amount of Each Receipt this Period

45.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAMMER, JE-ANNE, M., ,

Mailing Address 256 State Route 58

City
Sullivan

State
OH

Zip Code
44880

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
MAIL CLERK/SCREENER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210195

Amount of Each Receipt this Period

8.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

98.90

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAMMON, CRAIG, M., ,

Mailing Address 15582 Steen Road

City
PortageState
OHZip Code
43451FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ODJFS EXTERNAL AUDIT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210196

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAMMONDS, YANA, , ,

Mailing Address 134 S 6th Avenue

City
MaywoodState
ILZip Code
60153FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
HUMAN SERVICES CASEWORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

Transaction ID : SA11AI.208210

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAMMONS, LISA, A., ,

Mailing Address 910 1st Sreet

City
SanduskyState
OHZip Code
44870FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
HOSPITAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.209556

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

47.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 496 OF 1411
(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. HAMMONS, LISA, A., ,

Mailing Address 910 1st Sreet

City
SanduskyState
OHZip Code
44870FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
HOSPITAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			23			2018			

Transaction ID : SA11AI.210197

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAMPTON, ANTOINETTE, R., ,

Mailing Address 684 Gibbard Avenue

City
ColumbusState
OHZip Code
43201FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

418.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2018			

Transaction ID : SA11AI.208926

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAMPTON, ANTOINETTE, R., ,

Mailing Address 684 Gibbard Avenue

City
ColumbusState
OHZip Code
43201FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

437.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			09			2018			

Transaction ID : SA11AI.209557

Amount of Each Receipt this Period

19.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

47.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 497 OF 1411

(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. HAMPTON, ANTOINETTE, R., ,

Mailing Address 684 Gibbard Avenue

City
Columbus

State
OH

Zip Code
43201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210198

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HANES, KEVIN, S., ,

Mailing Address 176 Thunderwood Drive

City
Pittsburgh

State
PA

Zip Code
15102

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
COMMUNICATIONS SPECIALIST II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

784.73

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206303

Amount of Each Receipt this Period

39.48

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HANES, KEVIN, S., ,

Mailing Address 176 Thunderwood Drive

City
Pittsburgh

State
PA

Zip Code
15102

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
COMMUNICATIONS SPECIALIST II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

824.21

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206672

Amount of Each Receipt this Period

39.48

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

97.96

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 498 OF 1411

(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. HANLEY, DENISE, A., ,

Mailing Address 6602 N. Brookwood Lane

City
Peoria

State
IL

Zip Code
61614

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
FORENSIC SCIENTIST I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 05 / 2018

Transaction ID : SA11AI.208211

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HANSEN, MICHELE, J., ,

Mailing Address 211 W Eleventh Street

City
Streator

State
IL

Zip Code
61364

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
OFFICE COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.43

Date of Receipt

11 / 05 / 2018

Transaction ID : SA11AI.208212

Amount of Each Receipt this Period

41.66

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HANSON, KATI, R., ,

Mailing Address 59138 Elbow Lake Road

City
Finlayson

State
MN

Zip Code
55735

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 01 / 2018

Transaction ID : SA11AI.211678

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

82.66

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 499 OF 1411

(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. HANSON, RYAN, , ,

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 (for Individual)

AFSCME MN CN 5/CN14

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

703.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211679

Amount of Each Receipt this Period

70.68

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HARGIS, STEVEN, , ,

Mailing Address 1212 Jefferson Street SE

City

Olympia

State

WA

Zip Code

98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207620

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HARGIS, STEVEN, , ,

Mailing Address 1212 Jefferson Street SE

City

Olympia

State

WA

Zip Code

98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207842

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.68

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARGROVE, YVETTE, , ,

Mailing Address 1228 Buchanan Street

 City
 Sandusky

 State
 OH

 Zip Code
 44870

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 HOSPITAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.209558

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HARGROVE, YVETTE, , ,

Mailing Address 1228 Buchanan Street

 City
 Sandusky

 State
 OH

 Zip Code
 44870

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 HOSPITAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210199

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HARKINS, MICHAEL, F., ,

Mailing Address 1009 Shagbark 2e

 City
 New Lenox

 State
 IL

 Zip Code
 60451

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME IL CN 31/STATE OF IL

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2018

Transaction ID : SA11AI.210768

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 501 OF 1411

(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. HARKINS, MICHAEL, F., ,

Mailing Address 1009 Shagbark 2e

City
New Lenox

State
IL

Zip Code
60451

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

483.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208213

Amount of Each Receipt this Period

63.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HARLAN, RU'SEANNA, D., ,

Mailing Address 99 Miami Avenue
Apt. B

City
Columbus

State
OH

Zip Code
43203

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
FOOD SERVICE WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209559

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HARLAN, RU'SEANNA, D., ,

Mailing Address 99 Miami Avenue
Apt. B

City
Columbus

State
OH

Zip Code
43203

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
FOOD SERVICE WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210200

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

81.00

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARLOW, THOMAS, M., ,

Mailing Address 6413 Mason Road

City
Berlin Heights

State
OH

Zip Code
44814

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 ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210201

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HARPER, DAVID, T., ,

Mailing Address 4427 Tacoma Avenue

City
Lorain

State
OH

Zip Code
44055

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 ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210202

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HARPER, KATIE, L., ,

Mailing Address 3514 Grant Avenue

City
Sandusky

State
OH

Zip Code
44870

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
FOOD SERVICE WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209561

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

57.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARPER, KATIE, L., ,

Mailing Address 3514 Grant Avenue

City
SanduskyState
OHZip Code
44870FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
FOOD SERVICE WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210203

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HARPER, STYLE, , ,

Mailing Address 390 Worthington Road

City
WestervilleState
OHZip Code
43082FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	06	2018

Transaction ID : SA11AI.210204

Amount of Each Receipt this Period

18.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HARRINGTON, ANGELA, , ,

Mailing Address 390 Worthington Road

City
WestervilleState
OHZip Code
43082FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	06	2018

Transaction ID : SA11AI.210205

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

47.00

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARRIS, ALLISON, , ,

Mailing Address 1045 84th Avenue

City
Oakland

State
CA

Zip Code
94621

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

FIELD OFFICE ASSISTANT I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206673

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HARRIS, SARA, L., ,

Mailing Address 348 Harker Street

City
Mansfield

State
OH

Zip Code
44903

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 ▼

242.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208931

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HARRIS, SARA, L., ,

Mailing Address 348 Harker Street

City
Mansfield

State
OH

Zip Code
44903

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 ▼

253.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209562

Amount of Each Receipt this Period

11.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

32.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 505 OF 1411

(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. HARRIS, SARA, L., ,

Mailing Address 348 Harker Street

City
Mansfield

State
OH

Zip Code
44903

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 ▼

264.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210206

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HARRIS, TIRESA, , ,

Mailing Address P.O. Box 2633

City
Waianae

State
HI

Zip Code
96792

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 646

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.211281

Amount of Each Receipt this Period

20.83

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HARRISON, DONTA, , ,

Mailing Address 4855 Seminole Drive

City
San Diego

State
CA

Zip Code
92115

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 3930

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

924.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211150

Amount of Each Receipt this Period

84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

115.83

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARSA, JEREMY, M., ,

Mailing Address 6356 Debra Drive

City
Lorain

State
OH

Zip Code
44053

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 ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210207

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HARTMAN, RANDY, A., ,

Mailing Address 8473 Davisson Road

City
Mechanicsburg

State
OH

Zip Code
43044

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 ▼

374.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208933

Amount of Each Receipt this Period

17.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HARTMAN, RANDY, A., ,

Mailing Address 8473 Davisson Road

City
Mechanicsburg

State
OH

Zip Code
43044

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 ▼

391.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209564

Amount of Each Receipt this Period

17.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

42.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARTMAN, RANDY, A., ,

Mailing Address 8473 Davisson Road

City
MechanicsburgState
OHZip Code
43044FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210208

Amount of Each Receipt this Period

17.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HARWICK, RAYDENE, , ,Mailing Address 2101-27 Hill Road
Apt. #1City
SellersvilleState
PAZip Code
18960FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

862.62

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	08	2018

Transaction ID : SA11AI.207054

Amount of Each Receipt this Period

78.42

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HASKELL, ANTONIA, T., ,

Mailing Address P.O. Box 4371

City
KaneoheState
HIZip Code
96744FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 152Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	01	2018

Transaction ID : SA11AI.210995

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

115.42

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

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HASSELBACK, JACOB, , ,

Mailing Address 916 Fairwood Blvd.

City
Elyria

State
OH

Zip Code
44035

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 ▼

418.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208934

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HASSELBACK, JACOB, , ,

Mailing Address 916 Fairwood Blvd.

City
Elyria

State
OH

Zip Code
44035

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 ▼

437.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209565

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HASSELBACK, JACOB, , ,

Mailing Address 916 Fairwood Blvd.

City
Elyria

State
OH

Zip Code
44035

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 ▼

456.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210209

Amount of Each Receipt this Period

19.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

57.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 509 OF 1411
(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. HASTIE, RALPH, D., ,

Mailing Address 903 Estill Drive

City
SpringfieldState
ILZip Code
62707FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL RET CHPT 31Occupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208395

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAUENSTEIN, JAMES, , ,

Mailing Address 390 Worthington Road

City
WestervilleState
OHZip Code
43082FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	06	2018

Transaction ID : SA11AI.210210

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAUSE, ZACHARY, , ,

Mailing Address 4031 Executive Park Drive

City
HarrisburgState
PAZip Code
17111FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

669.51

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	08	2018

Transaction ID : SA11AI.207055

Amount of Each Receipt this Period

60.74

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

140.74

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAWKS-LEE, DAWN, E., ,

Mailing Address 14303 Flomation Court

City
Centreville

State
VA

Zip Code
20121

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ASSOCIATE GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

736.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206305

Amount of Each Receipt this Period

40.90

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAWKS-LEE, DAWN, E., ,

Mailing Address 14303 Flomation Court

City
Centreville

State
VA

Zip Code
20121

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ASSOCIATE GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

777.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206674

Amount of Each Receipt this Period

40.90

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAYBURN, JESSICA, D., ,

Mailing Address 16115 State Route 28

City
Chillicothe

State
OH

Zip Code
45601

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 ▼

209.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208935

Amount of Each Receipt this Period

9.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

91.30

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAYBURN, JESSICA, D., ,

Mailing Address 16115 State Route 28

City
ChillicotheState
OHZip Code
45601FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.50

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209566

Amount of Each Receipt this Period

9.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAYBURN, JESSICA, D., ,

Mailing Address 16115 State Route 28

City
ChillicotheState
OHZip Code
45601FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210211

Amount of Each Receipt this Period

9.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAYDEN, WAMU, D., ,Mailing Address 1692 Bryden Road
Apt. ACity
ColumbusState
OHZip Code
43205FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
TRAINING OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

298.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.208936

Amount of Each Receipt this Period

17.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

36.00

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAYDEN, WAMU, D., ,

 Mailing Address 1692 Bryden Road
 Apt. A

 City
 Columbus

 State
 OH

 Zip Code
 43205

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 TRAINING OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.209567

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAYDEN, WAMU, D., ,

 Mailing Address 1692 Bryden Road
 Apt. A

 City
 Columbus

 State
 OH

 Zip Code
 43205

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 TRAINING OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210212

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAYES, GINET, , ,

Mailing Address 91-1356 Kekahili Street

 City
 Kapolei

 State
 HI

 Zip Code
 96707

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME HI LOC 152

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2018

Transaction ID : SA11AI.210996

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAYSLIP, HOPE, M., ,

Mailing Address 241 Fair Court Street

City

West Union

State

OH

Zip Code

45693

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

HOSPITAL AIDE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.208937

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAYSLIP, HOPE, M., ,

Mailing Address 241 Fair Court Street

City

West Union

State

OH

Zip Code

45693

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

HOSPITAL AIDE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209568

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAYSLIP, HOPE, M., ,

Mailing Address 241 Fair Court Street

City

West Union

State

OH

Zip Code

45693

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

HOSPITAL AIDE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210213

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

30.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 514 OF 1411

(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. HAZARD, LISA, , ,

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 ▼

 982.30

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 11 / 08 / 2018

Transaction ID : SA11AI.207056

Amount of Each Receipt this Period

 89.30
☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HEDBERG, MARK, , ,

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 (for Individual)
 AFSCME IA CN 61

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

 208.40

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 10 / 18 / 2018

Transaction ID : SA11AI.211870

Amount of Each Receipt this Period

 20.84
☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HEDBERG, MARK, , ,

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 (for Individual)
 AFSCME IA CN 61

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

 229.24

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 11 / 06 / 2018

Transaction ID : SA11AI.211906

Amount of Each Receipt this Period

 20.84
☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

 130.98
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 515 OF 1411

(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. HEGER, THERESA, M., ,

Mailing Address 200 Granger Road
Unit 39

City
Medina

State
OH

Zip Code
44256

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HIGHWAY TECHNICIAN I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208938

Amount of Each Receipt this Period

17.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HEGER, THERESA, M., ,

Mailing Address 200 Granger Road
Unit 39

City
Medina

State
OH

Zip Code
44256

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HIGHWAY TECHNICIAN I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209569

Amount of Each Receipt this Period

17.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HEGER, THERESA, M., ,

Mailing Address 200 Granger Road
Unit 39

City
Medina

State
OH

Zip Code
44256

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HIGHWAY TECHNICIAN I

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

408.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210214

Amount of Each Receipt this Period

17.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

51.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 516 OF 1411

(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. HEICHELBECH, JULIE, A., ,

Mailing Address 4831 Stein Road

City
Shelby

State
OH

Zip Code
44875

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
LICENSED PRACTICAL NURSE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210215

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HEIENS, JAN, D., ,

Mailing Address 2105 Parkview Drive

City
Springfield

State
IL

Zip Code
62704

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
INFORMATION SYSTEMS ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 05 / 2018

Transaction ID : SA11AI.208214

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HEINLEN, BOBBIE-JO, , ,

Mailing Address 153 Clover Avenue

City
Marion

State
OH

Zip Code
43302

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 ▼

204.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210216

Amount of Each Receipt this Period

8.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

47.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 517 OF 1411

(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. HEINLEN, KYLE, D., ,

Mailing Address 2699 Shearer Road

City

Bucyrus

State

OH

Zip Code

44820

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
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.208941

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HEINLEN, KYLE, D., ,

Mailing Address 2699 Shearer Road

City

Bucyrus

State

OH

Zip Code

44820

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
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209572

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HEINLEN, KYLE, D., ,

Mailing Address 2699 Shearer Road

City

Bucyrus

State

OH

Zip Code

44820

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
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210217

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

39.00

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 518 OF 1411

(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. HEIPLE, MARY, E., ,

Mailing Address 173 Mcknight Road N
#312

City
Saint Paul

State
MN

Zip Code
55119

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211682

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HEISER, SANDRA, K., ,

Mailing Address 8033 Excelsior Drive
Suite C

City
Madison

State
WI

Zip Code
53717

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WI CN 32/MBR

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 14 / 2018

Transaction ID : SA11AI.211439

Amount of Each Receipt this Period

19.72

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HELLMANN, RANDY, , ,

Mailing Address 10954 Slate Drive

City
Carlyle

State
IL

Zip Code
62231

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

761.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208215

Amount of Each Receipt this Period

76.28

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

116.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HELM, ANTONIO, L., ,

Mailing Address 406 Knob Avenue

City

Reynoldsburg

State

OH

Zip Code

43068

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

INFRASTRUCTURE SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.209573

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HELM, ANTONIO, L., ,

Mailing Address 406 Knob Avenue

City

Reynoldsburg

State

OH

Zip Code

43068

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

INFRASTRUCTURE SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210218

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HELMBERGER, GREGG, A., ,Mailing Address 1192 California Drive
Apt. 206

City

Saint Paul

State

MN

Zip Code

55108

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2018

Transaction ID : SA11AI.211683

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

48.00

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 520 OF 1411

(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. HELMICK, ROBERT, E., ,

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 (for Individual)

AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 18 / 2018

Transaction ID : SA11AI.211843

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HELMICK, ROBERT, E., ,

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 (for Individual)

AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 26 / 2018

Transaction ID : SA11AI.211907

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HELTON, RENITA, L., ,

Mailing Address 2025 W Galbraith Road
Apt. E

City

Cincinnati

State

OH

Zip Code

45239

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

SECRETARY

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 26 / 2018

Transaction ID : SA11AI.208943

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

40.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HELTON, RENITA, L., ,Mailing Address 2025 W Galbraith Road
Apt. ECity
CincinnatiState
OHZip Code
45239FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
SECRETARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M	D D	Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209574

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HELTON, RENITA, L., ,Mailing Address 2025 W Galbraith Road
Apt. ECity
CincinnatiState
OHZip Code
45239FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
SECRETARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M	D D	Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210219

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HENDERSON, DAVID, J., ,

Mailing Address 2040 Spring Valley Road

City
PittsburghState
PAZip Code
15243-1422FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1440.26

Date of Receipt

M M	D D	Y Y Y Y
11	08	2018

Transaction ID : SA11AI.207057

Amount of Each Receipt this Period

125.24

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

165.24

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 522 OF 1411
(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. HENDERSON, LELA, M, ,

Mailing Address 2153 B North 5th Street

City
HarrisburgState
PAZip Code
17110FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.207058

Amount of Each Receipt this Period

22.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HENDERSON, TIMOTHY, , ,

Mailing Address 6987 W. Shadow Lake Drive

City
Lino LakesState
MNZip Code
55014-1931FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

987.55

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	01	2018

Transaction ID : SA11AI.211684

Amount of Each Receipt this Period

135.58

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HENDRICK, AMY, , ,Mailing Address 1020 N. Quincy Street
#903City
ArlingtonState
VAZip Code
22201FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
ASSISTANT DIRECTOR, DIGITAL AND

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

985.25

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206307

Amount of Each Receipt this Period

46.58

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

204.16

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 523 OF 1411

(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. HENDRICK, AMY, , ,

Mailing Address 1020 N. Quincy Street
#903

City
Arlington

State
VA

Zip Code
22201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ASSISTANT DIRECTOR, DIGITAL ANI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1031.83

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206677

Amount of Each Receipt this Period

46.58

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HENDRICKSON, SCOTT, D., ,

Mailing Address 54 Banks Blvd.

City
Silver Bay

State
MN

Zip Code
55614

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
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
11 / 01 / 2018

Transaction ID : SA11AI.211685

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HENKE, TERRY, A., ,

Mailing Address 1652 Bowers Road

City
Mansfield

State
OH

Zip Code
44903

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 ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210220

Amount of Each Receipt this Period

8.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.08

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 524 OF 1411

(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. HENLEY, ROGER, N., ,

Mailing Address 1145 Devonwood Road

 City
 Mansfield

 State
 OH

 Zip Code
 44907

 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 ▼

 200.10

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 11 / 09 / 2018

Transaction ID : SA11AI.209576

Amount of Each Receipt this Period

 8.70
☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HENLEY, ROGER, N., ,

Mailing Address 1145 Devonwood Road

 City
 Mansfield

 State
 OH

 Zip Code
 44907

 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 ▼

 208.80

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2018

Transaction ID : SA11AI.210221

Amount of Each Receipt this Period

 8.70
☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HENRICKSEN, SUSAN, R., ,

Mailing Address 16511 193rd Avenue E

 City
 Bonney Lake

 State
 WA

 Zip Code
 98391

 FEC ID number of contributing
 federal political committee.

 C

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 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 Y Y
 10 / 25 / 2018

Transaction ID : SA11AI.207420

Amount of Each Receipt this Period

 21.00
☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

 38.40

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HENRICKSEN, SUSAN, R., ,

Mailing Address 16511 193rd Avenue E

City
Bonney Lake

State
WA

Zip Code
98391

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.207621

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HENRICKSEN, SUSAN, R., ,

Mailing Address 16511 193rd Avenue E

City
Bonney Lake

State
WA

Zip Code
98391

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.00

Date of Receipt

11 / 26 / 2018

Transaction ID : SA11AI.207844

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HENRICKSON, LISA, B., ,

Mailing Address 23130 Fontana Street NE

City
Stacy

State
MN

Zip Code
55079

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 01 / 2018

Transaction ID : SA11AI.211686

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

62.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
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☐ 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. HENRY, CHERYL, S., ,

Mailing Address 3173 Hogan Way

City
ColumbusState
OHZip Code
43219FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
INFRASTRUCTURE SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210222

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HENRY, MICHELLE, C., ,

Mailing Address 5614 S 147th Street

City
TukwilaState
WAZip Code
98168FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/COMM COLLEGEOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	25	2018

Transaction ID : SA11AI.207421

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HENRY, MICHELLE, C., ,

Mailing Address 5614 S 147th Street

City
TukwilaState
WAZip Code
98168FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/COMM COLLEGEOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.207622

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

38.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HENRY, MICHELLE, C., ,

Mailing Address 5614 S 147th Street

City

Tukwila

State

WA

Zip Code

98168

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28/COMM COLLEGE

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2018

Transaction ID : SA11AI.207845

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HENSON, JOHN, , ,

Mailing Address P.O. Box 88593

City

Steilacoom

State

WA

Zip Code

98388

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2018

Transaction ID : SA11AI.207422

Amount of Each Receipt this Period

12.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HENSON, JOHN, , ,

Mailing Address P.O. Box 88593

City

Steilacoom

State

WA

Zip Code

98388

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify)
☐ General

Aggregate Year-to-Date ▼

262.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.207623

Amount of Each Receipt this Period

12.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

40.00

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HENSON, JOHN, , ,

Mailing Address P.O. Box 88593

City
SteilacoomState
WAZip Code
98388FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	26	2018

Transaction ID : SA11AI.207846

Amount of Each Receipt this Period

12.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HERD, LEROY, , ,

Mailing Address 1520 Lewis Center Road
Suite BCity
Lewis CenterState
OHZip Code
43035FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.19

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	06	2018

Transaction ID : SA11AI.210895

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HERMAN, DANA, E., ,

Mailing Address 7875 Keplinger Road

City
HillsboroState
OHZip Code
45133FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.208947

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

85.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HERMAN, DANA, E., ,

Mailing Address 7875 Keplinger Road

City
HillsboroState
OHZip Code
45133FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209578

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HERMAN, DANA, E., ,

Mailing Address 7875 Keplinger Road

City
HillsboroState
OHZip Code
45133FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210223

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HERNANDEZ, GABRIEL, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	25	2018

Transaction ID : SA11AI.207423

Amount of Each Receipt this Period

12.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

38.00

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HERNANDEZ, GABRIEL, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 09 / 2018

Transaction ID : SA11AI.207624

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HERNANDEZ, GABRIEL, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207847

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HERNANDEZ, JEANETTE, , ,

Mailing Address 4236 N Mulligan Avenue

City
Chiacgo

State
IL

Zip Code
60634

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
ADMINISTRATIVE AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

208.40

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208216

Amount of Each Receipt this Period

20.84

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

44.84

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HERRICK, ROSE, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.207625

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HERRICK, ROSE, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 26 / 2018

Transaction ID : SA11AI.207848

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HERTZOG, ERIC, D., ,

Mailing Address 141 174th Street E.

City
Spanaway

State
WA

Zip Code
98387

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

660.00

Date of Receipt

10 / 25 / 2018

Transaction ID : SA11AI.207425

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 532 OF 1411

(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. HERTZOG, ERIC, D., ,

Mailing Address 141 174th Street E.

 City
 Spanaway

 State
 WA

 Zip Code
 98387

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.207626

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HERTZOG, ERIC, D., ,

Mailing Address 141 174th Street E.

 City
 Spanaway

 State
 WA

 Zip Code
 98387

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.207849

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HESTER, JOHANNA, P., ,

Mailing Address 805 Glen Drive

 City
 San Leandro

 State
 CA

 Zip Code
 94577

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME CA LOC 3930

 Occupation (for Individual)
 SPECIAL ASSISTANT TO EXEC. DIRE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.206151

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 533 OF 1411

(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. **HESTER, JOHANNA, P., ,**

Mailing Address 805 Glen Drive

City

San Leandro

State

CA

Zip Code

94577

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME CA LOC 3930

Occupation (for Individual)

SPECIAL ASSISTANT TO EXEC. DIRE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211151

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **HETRICK, MATTHEW, , ,**Mailing Address 1326 Edanola Avenue
#6

City

Lakewood

State

OH

Zip Code

44107

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH CN 8

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

613.72

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210896

Amount of Each Receipt this Period

57.24

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **HETZEL, MICHELLE, , ,**

Mailing Address 1212 Jefferson Street SE

City

Olympia

State

WA

Zip Code

98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207627

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

107.24

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 534 OF 1411

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HETZEL, MICHELLE, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 26 / 2018

Transaction ID : SA11AI.207850

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HEWETT, ANGELA, L., ,

Mailing Address 324 Franklin Avenue

City
Silver Spring

State
MD

Zip Code
20901

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
AREA ORGANIZING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1757.80

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206309

Amount of Each Receipt this Period

85.14

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HEWETT, ANGELA, L., ,

Mailing Address 324 Franklin Avenue

City
Silver Spring

State
MD

Zip Code
20901

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
AREA ORGANIZING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1842.94

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206679

Amount of Each Receipt this Period

85.14

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

180.28

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 535 OF 1411

(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. HICKEY, JOSEPH, C., ,

Mailing Address 928 North Irving Avenue

City
Scranton

State
PA

Zip Code
18510

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.207059

Amount of Each Receipt this Period

44.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HIGGINS, SANDRA, M., ,

Mailing Address 4501 Colorado Avenue N

City
Minneapolis

State
MN

Zip Code
55422

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
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
11 / 01 / 2018

Transaction ID : SA11AI.211687

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HIGHTS, JOY, C., ,

Mailing Address 719 Blackhawk Drive

City
University Park

State
IL

Zip Code
60484

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
MENTAL HEALTH TECH I

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

218.82

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208217

Amount of Each Receipt this Period

31.26

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.26

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
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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. HILDEBRAND, HALEIGH, A., ,

Mailing Address 100 Florida Avenue NE
#502

City
Washington

State
DC

Zip Code
20002

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

POLITICAL RESEARCH SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

635.31

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206310

Amount of Each Receipt this Period

32.73

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HILDEBRAND, HALEIGH, A., ,

Mailing Address 100 Florida Avenue NE
#502

City
Washington

State
DC

Zip Code
20002

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

POLITICAL RESEARCH SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

668.04

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206680

Amount of Each Receipt this Period

32.73

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HILL, CINDY, L., ,

Mailing Address 2958 Pleasant Drive NE

City
Lancaster

State
OH

Zip Code
43130

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

ODJFS CUSTOMER SRVC REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208948

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.46

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. HILL, CINDY, L., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 2958 Pleasant Drive NE City Lancaster State OH Zip Code 43130 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH Occupation (for Individual) ODJFS CUSTOMER SRVC REP Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 230.00			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 09 / 2018 Transaction ID : SA11AI.209579 Amount of Each Receipt this Period 10.00 ☐ Memo Item
B. HILL, CINDY, L., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 2958 Pleasant Drive NE City Lancaster State OH Zip Code 43130 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH Occupation (for Individual) ODJFS CUSTOMER SRVC REP Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 23 / 2018 Transaction ID : SA11AI.210224 Amount of Each Receipt this Period 10.00 ☐ Memo Item
C. HILL, JERRY, L., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 6974 Summergreen Drive City Huber Heights State OH Zip Code 45424 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME OH CN 8/DAYTON METROHEALTH Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 221.03			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 23 / 2018 Transaction ID : SA11AI.210805 Amount of Each Receipt this Period 9.61 ☐ Memo Item
SUBTOTAL of Receipts This Page (optional)..... ▶			29.61
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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. HILL, JERRY, L., ,			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 06 / 2018		
Mailing Address 6974 Summergreen Drive			Transaction ID : SA11AI.210806		
City Huber Heights	State OH	Zip Code 45424	Amount of Each Receipt this Period 9.61		
FEC ID number of contributing federal political committee. C			☐ Memo Item		
Name of Employer (for Individual) AFSCME OH CN 8/DAYTON METROHEALTH		Occupation (for Individual) STAFF REPRESENTATIVE			
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Aggregate Year-to-Date ▼ 230.64			
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. HILL, JERRY, L., ,			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 21 / 2018		
Mailing Address 6974 Summergreen Drive			Transaction ID : SA11AI.210897		
City Huber Heights	State OH	Zip Code 45424	Amount of Each Receipt this Period 9.61		
FEC ID number of contributing federal political committee. C			☐ Memo Item		
Name of Employer (for Individual) AFSCME OH CN 8/DAYTON METROHEALTH		Occupation (for Individual) STAFF REPRESENTATIVE			
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Aggregate Year-to-Date ▼ 240.25			
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. HILL, LORRAINE, C., ,			Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Mailing Address 18412 W Buckboard Avenue			Transaction ID : SA11AI.207427		
City Medical Lake	State WA	Zip Code 99022	Amount of Each Receipt this Period 12.00		
FEC ID number of contributing federal political committee. C			☐ Memo Item		
Name of Employer (for Individual) AFSCME WA CN 28/COMM COLLEGE		Occupation (for Individual) STAFF REPRESENTATIVE			
Receipt For: ☐ Primary ☐ General ☐ Other (specify)		Aggregate Year-to-Date ▼ 240.00			
SUBTOTAL of Receipts This Page (optional)..... ▶			31.22		
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

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HILL, LORRAINE, C., ,

Mailing Address 18412 W Buckboard Avenue

City
Medical Lake

State
WA

Zip Code
99022

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/COMM COLLEGE

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207628

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HILL, LORRAINE, C., ,

Mailing Address 18412 W Buckboard Avenue

City
Medical Lake

State
WA

Zip Code
99022

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/COMM COLLEGE

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207851

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HILL, PHILLIP, E., ,

Mailing Address 3346 Heatherdowns Blvd.

City
Toledo

State
OH

Zip Code
43614

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
JUVENILE CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208949

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

34.00

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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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. HILL, PHILLIP, E., ,

Mailing Address 3346 Heatherdowns Blvd.

City
Toledo

State
OH

Zip Code
43614

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
JUVENILE CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209580

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HILL, PHILLIP, E., ,

Mailing Address 3346 Heatherdowns Blvd.

City
Toledo

State
OH

Zip Code
43614

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
JUVENILE CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210225

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HILL, SHEILA, I., ,

Mailing Address 190 W. Ostend Street
Suite 101

City
Baltimore

State
MD

Zip Code
21230

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MD CN 3

Occupation (for Individual)
EXECUTIVE BOARD MEMBER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

555.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211318

Amount of Each Receipt this Period

72.94

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

92.94

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HILL, STEPHANN, S., ,

Mailing Address 2774 windlow Drive

 City
 Dayton

 State
 OH

 Zip Code
 45406

 FEC ID number of contributing
 federal political committee.

 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 ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2018

Transaction ID : SA11AI.208950

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HILL, STEPHANN, S., ,

Mailing Address 2774 windlow Drive

 City
 Dayton

 State
 OH

 Zip Code
 45406

 FEC ID number of contributing
 federal political committee.

 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 ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.209581

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HILL, STEPHANN, S., ,

Mailing Address 2774 windlow Drive

 City
 Dayton

 State
 OH

 Zip Code
 45406

 FEC ID number of contributing
 federal political committee.

 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 ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210226

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 542 OF 1411

(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. HINES, DELVIN, V., ,

Mailing Address 2112 Coach Road N.

City
Columbus

State
OH

Zip Code
43220

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
DATABASE SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208951

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HINES, DELVIN, V., ,

Mailing Address 2112 Coach Road N.

City
Columbus

State
OH

Zip Code
43220

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
DATABASE SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209582

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HINES, DELVIN, V., ,

Mailing Address 2112 Coach Road N.

City
Columbus

State
OH

Zip Code
43220

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
DATABASE SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210227

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

30.00

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 543 OF 1411

(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. HINES, JESSE, B., ,

Mailing Address 3089 Hogan Way

City
Columbus

State
OH

Zip Code
43219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209583

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HINES, JESSE, B., ,

Mailing Address 3089 Hogan Way

City
Columbus

State
OH

Zip Code
43219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210228

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HINGA, SEAN, , ,

Mailing Address 3137 Fulton Street

City
Denver

State
CO

Zip Code
80238

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
POLITICAL ACTION REP III

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1014.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206312

Amount of Each Receipt this Period

51.63

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

69.63

X	11a		11b		11c		12		
	13		14		15		16		17

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

FEC Schedule A (Form 3X) Rev. 06/2016

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
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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. HINTZ, ANDREA, R ., ,

Mailing Address 1405 Wamajo Drive

 City
 Sandusky

 State
 OH

 Zip Code
 44870

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 LPN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.210229

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HIPPS, TYRONE, , ,

Mailing Address 6800 N High Street

 City
 Worthington

 State
 OH

 Zip Code
 43085

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH CN 8/METROHEALTH

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.210807

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HIPPS, TYRONE, , ,

Mailing Address 6800 N High Street

 City
 Worthington

 State
 OH

 Zip Code
 43085

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH CN 8/METROHEALTH

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.210898

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HIRAI, RADFORD, , ,

Mailing Address 1426 North School Street

City
HonoluluState
HIZip Code
96817FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 646Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

 M M / D D / Y Y Y Y Y
 11 / 14 / 2018

Transaction ID : SA11AI.211282

Amount of Each Receipt this Period

41.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HO, ELIZABETH, C., ,

Mailing Address 1511 Kalaniewai Street

City
HonoluluState
HIZip Code
96821FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1246.16

Date of Receipt

 M M / D D / Y Y Y Y Y
 10 / 31 / 2018

Transaction ID : SA11AI.206313

Amount of Each Receipt this Period

56.76

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HO, ELIZABETH, C., ,

Mailing Address 1511 Kalaniewai Street

City
HonoluluState
HIZip Code
96821FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1302.92

Date of Receipt

 M M / D D / Y Y Y Y Y
 11 / 15 / 2018

Transaction ID : SA11AI.206684

Amount of Each Receipt this Period

56.76

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

155.19

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 547 OF 1411

(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. HOCKETT, ALLISON, D., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 1274 Careys Run Pond Creek Road City W Portsmouth State OH Zip Code 45663 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH Occupation (for Individual) MAIL CLERK/SCREENER Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 204.00			Date of Receipt M M / D D / Y Y Y Y Y 11 / 23 / 2018 Transaction ID : SA11AI.210230 Amount of Each Receipt this Period 8.50 ☐ Memo Item
B. HODAPP, BENJAMIN, J., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 3828 Georgia Avenue NW #218 City Washington State DC Zip Code 20011 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME INT'L Occupation (for Individual) RETIREE FIELD MANAGER Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 935.06			Date of Receipt M M / D D / Y Y Y Y Y 10 / 31 / 2018 Transaction ID : SA11AI.206314 Amount of Each Receipt this Period 42.95 ☐ Memo Item
C. HODAPP, BENJAMIN, J., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 3828 Georgia Avenue NW #218 City Washington State DC Zip Code 20011 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME INT'L Occupation (for Individual) RETIREE FIELD MANAGER Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 978.01			Date of Receipt M M / D D / Y Y Y Y Y 11 / 15 / 2018 Transaction ID : SA11AI.206685 Amount of Each Receipt this Period 42.95 ☐ Memo Item
SUBTOTAL of Receipts This Page (optional)..... ▶			94.40
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 548 OF 1411

(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. HODGE, ALISHA, L., ,

Mailing Address 213 Maple Avenue

City
Galesburg

State
IL

Zip Code
61401

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 ADMIN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208218

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HODGE, KARLA, , ,

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 (for Individual)
AFSCME PA CN 13

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1169.30

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207060

Amount of Each Receipt this Period

106.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOERTH, MARTIN, N., ,

Mailing Address 3935 Penn Avenue N

City
Minneapolis

State
MN

Zip Code
55412

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/ST. PAUL P.S.

Occupation (for Individual)
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
11 / 01 / 2018

Transaction ID : SA11AI.211688

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

176.30

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. **HOFFEN, COLE, , ,**

Mailing Address 355 Table Rock Road

City
Gettysburg

State
PA

Zip Code
17325

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.207061

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **HOFFMAN, JOEL, S., ,**

Mailing Address 1118 Rossman Avenue

City
Detroit Lakes

State
MN

Zip Code
56501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211689

Amount of Each Receipt this Period

39.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **HOFFMAN, VICTORIA, , ,**

Mailing Address 1004 Brooks End Court

City
Columbus

State
OH

Zip Code
43204

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HOUSING DEV. ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209586

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

60.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 550 OF 1411

(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. HOFFMAN, VICTORIA, , ,

Mailing Address 1004 Brooks End Court

 City
 Columbus

 State
 OH

 Zip Code
 43204

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 HOUSING DEV. ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210231

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOLCOMB, ROSCHELLE, N., ,

Mailing Address 409 Park Road

 City
 Worthington

 State
 OH

 Zip Code
 43085

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 DISABILITY CLAIMS ADJUSTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2018

Transaction ID : SA11AI.208956

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOLCOMB, ROSCHELLE, N., ,

Mailing Address 409 Park Road

 City
 Worthington

 State
 OH

 Zip Code
 43085

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 DISABILITY CLAIMS ADJUSTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.209587

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 551 OF 1411

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HOLCOMB, ROSCHELLE, N., ,

Mailing Address 409 Park Road

City
Worthington

State
OH

Zip Code
43085

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
DISABILITY CLAIMS ADJUSTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210232

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOLDREN, RODNEY, L., ,

Mailing Address 804 Morrison Road

City
Chillicothe

State
OH

Zip Code
45601

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
LOCKSMITH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208957

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOLDREN, RODNEY, L., ,

Mailing Address 804 Morrison Road

City
Chillicothe

State
OH

Zip Code
45601

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
LOCKSMITH

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209588

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 552 OF 1411

(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. HOLDREN, RODNEY, L., ,

Mailing Address 804 Morrison Road

City
Chillicothe

State
OH

Zip Code
45601

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
LOCKSMITH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210233

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOLLENBACH, MEGAN, , ,

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 ▼

579.48

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207062

Amount of Each Receipt this Period

52.68

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOLLIDAY-GREENE, RAVONDA, A., ,

Mailing Address 3731 W 2nd Street

City
Dayton

State
OH

Zip Code
45417

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
THERAPUTIC PROGRAM TECHNICIAI

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209589

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

71.68

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 553 OF 1411

(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. HOLLIDAY-GREENE, RAVONDA, A., ,

Mailing Address 3731 W 2nd Street

City
Dayton

State
OH

Zip Code
45417

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210234

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOLLIFIELD, RICHIE, A., ,

Mailing Address 3350 Everson Avenue

City
Cincinnati

State
OH

Zip Code
45209

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/CINCINNATTI CITY

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.88

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.210899

Amount of Each Receipt this Period

28.86

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOLMAN, STEVEN, , ,

Mailing Address 15424 Greenwood Road

City
Dolton

State
IL

Zip Code
60419

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
PUBLIC SERVICE ADMIN.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

208.40

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208219

Amount of Each Receipt this Period

31.26

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

69.12

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 554 OF 1411

(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. HOLMAN-BELCHER, KELLI, , ,

Mailing Address 232 Brassic Way

 City
 Columbus

 State
 OH

 Zip Code
 43213

 FEC ID number of contributing
 federal political committee.

C

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 CLERK I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2018			

Transaction ID : SA11AI.208959

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOLMAN-BELCHER, KELLI, , ,

Mailing Address 232 Brassic Way

 City
 Columbus

 State
 OH

 Zip Code
 43213

 FEC ID number of contributing
 federal political committee.

C

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 CLERK I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			09			2018			

Transaction ID : SA11AI.209590

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOLMAN-BELCHER, KELLI, , ,

Mailing Address 232 Brassic Way

 City
 Columbus

 State
 OH

 Zip Code
 43213

 FEC ID number of contributing
 federal political committee.

C

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 CLERK I

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			23			2018			

Transaction ID : SA11AI.210235

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

39.00

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 555 OF 1411

(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. HOLMES, JOSEPH, E., ,

Mailing Address 82 Alpine Drive

City
Mansfield

State
OH

Zip Code
44906

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 ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210236

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOLMGREN, SCOTT, , ,

Mailing Address 60 Broadmeadows Blvd.
Apt. 237

City
Columbus

State
OH

Zip Code
43214

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 ▼

292.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208961

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOLMGREN, SCOTT, , ,

Mailing Address 60 Broadmeadows Blvd.
Apt. 237

City
Columbus

State
OH

Zip Code
43214

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 ▼

306.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209592

Amount of Each Receipt this Period

14.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

36.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HOLMGREN, SCOTT, , ,Mailing Address 60 Broadmeadows Blvd.
Apt. 237City
ColumbusState
OHZip Code
43214FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210237

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOLTON, JOANN, D., ,

Mailing Address 478 Pleasure Creek Drive

City
MinneapolisState
MNZip Code
55434FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MNOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.59

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2018

Transaction ID : SA11AI.211690

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOLY, CHRISTOPHER, J., ,

Mailing Address 12 S 614 Knoebel

City
LemontState
ILZip Code
60439FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
ENVIRON PROTECTION SR.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

208.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

Transaction ID : SA11AI.208220

Amount of Each Receipt this Period

20.84

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

59.84

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 557 OF 1411

(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. HOMAN, COLLEEN, , ,

Mailing Address 6515 Forest Court

City

Windsor Heights

State

IA

Zip Code

50324

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IA CN 61

Occupation (for Individual)

DELEGATE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	06	2018

Transaction ID : SA11AI.211908

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOMAN, DANNY, J., ,

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 (for Individual)

AFSCME IA CN 61

Occupation (for Individual)

PRESIDENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1775.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	18	2018

Transaction ID : SA11AI.211872

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOMAN, DANNY, J., ,

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 (for Individual)

AFSCME IA CN 61

Occupation (for Individual)

PRESIDENT

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

1845.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206153

Amount of Each Receipt this Period

70.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

190.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 558 OF 1411

(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. HOMAN, DANNY, J., ,

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 (for Individual)

AFSCME IA CN 61

Occupation (for Individual)

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1945.00

Date of Receipt

11 / 06 / 2018

Transaction ID : SA11AI.211909

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOMER, WILLIAM, F., ,

Mailing Address 500 N Lexington-Springmill Road
#50

City

Ontario

State

OH

Zip Code

44906

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 ▼

341.00

Date of Receipt

10 / 26 / 2018

Transaction ID : SA11AI.208962

Amount of Each Receipt this Period

15.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOMER, WILLIAM, F., ,

Mailing Address 500 N Lexington-Springmill Road
#50

City

Ontario

State

OH

Zip Code

44906

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 ▼

356.50

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209593

Amount of Each Receipt this Period

15.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

131.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 559 OF 1411

(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. HOMER, WILLIAM, F., ,

Mailing Address 500 N Lexington-Springmill Road
 #50

City
 Ontario

State
 OH

Zip Code
 44906

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 ▼

372.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 11 / 23 / 2018

Transaction ID : SA11AI.210238

Amount of Each Receipt this Period

15.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HONDA, FRANCINE, W., ,

Mailing Address 888 Mililani Street
 Suite 601

City
 Honolulu

State
 HI

Zip Code
 96813-2991

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 AFSCME HI LOC 152

Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2018

Transaction ID : SA11AI.210997

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOOPER, SUZANNE, , ,

Mailing Address 446 S Union Street

City
 Galion

State
 OH

Zip Code
 44833

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 ▼

207.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2018

Transaction ID : SA11AI.209594

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

49.50

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HOOPER, SUZANNE, , ,

Mailing Address 446 S Union Street

City
GalionState
OHZip Code
44833FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210239

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOOSER, CHRISTOPHER, , ,

Mailing Address 615 South Second Street

City
DecaturState
ILZip Code
62526FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

762.79

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208221

Amount of Each Receipt this Period

76.28

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOPPE, ELIZABETH, M., ,

Mailing Address 32 Spring Street

City
NorwalkState
OHZip Code
44857FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
FOOD SERVICE WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209595

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

94.28

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 561 OF 1411
(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. HOPPE, ELIZABETH, M., ,

Mailing Address 32 Spring Street

City
NorwalkState
OHZip Code
44857FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
FOOD SERVICE WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			23			2018			

Transaction ID : SA11AI.210240

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HORNER, LINDA, K., ,

Mailing Address P.O. Box 260

City
RimersburgState
PAZip Code
16248FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/PASSHEOccupation (for Individual)
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
10			31			2018			

Transaction ID : SA11AI.207063

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOSHIDA, DARLEEN, K., ,

Mailing Address 1374 Mailani Street

City
HiloState
HIZip Code
96720FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 152Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

229.35

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2018			

Transaction ID : SA11AI.210998

Amount of Each Receipt this Period

20.85

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

49.85

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 562 OF 1411

(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. HOSKINS, CHRISTINE, R., ,

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 (for Individual)

AFSCME INT'L

Occupation (for Individual)

AFFILIATE RELATIONS COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1030.20

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206315

Amount of Each Receipt this Period

45.28

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOSKINS, CHRISTINE, R., ,

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 (for Individual)

AFSCME INT'L

Occupation (for Individual)

AFFILIATE RELATIONS COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1075.48

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	15	2018

Transaction ID : SA11AI.206686

Amount of Each Receipt this Period

45.28

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOSTETTER, ERIK, , ,

Mailing Address 2012 Greenbriar Drive

City

Springfield

State

IL

Zip Code

62704

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208222

Amount of Each Receipt this Period

22.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

112.56

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 563 OF 1411

(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. HOUSTON, PAMELA, , ,

Mailing Address 1615 Poplar

City
CairoState
ILZip Code
62914FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

CHILD PROTECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.82

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208223

Amount of Each Receipt this Period

31.26

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOUZE, MARK, A., ,

Mailing Address 10330 Crestline Street SW

City

Beach City

State
OHZip Code
44608FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

INFORMATION TECHNOLOGY TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210241

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOWARD, DARIAN, K., ,

Mailing Address 1535 Cory Drive

City

Dayton

State
OHZip Code
45406FEC 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 ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.208966

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

49.76

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 564 OF 1411

(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. HOWARD, DARIAN, K., ,

Mailing Address 1535 Cory Drive

City
Dayton

State
OH

Zip Code
45406

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 ▼

230.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209597

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOWARD, DARIAN, K., ,

Mailing Address 1535 Cory Drive

City
Dayton

State
OH

Zip Code
45406

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 ▼

240.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210242

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOWARD, DENISE, A., ,

Mailing Address 5582 Levi Kramer Blvd.

City
Canal Wincheste

State
OH

Zip Code
43110

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
INVENTORY CONTROL SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

396.00

Date of Receipt

10 / 26 / 2018

Transaction ID : SA11AI.208967

Amount of Each Receipt this Period

18.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

38.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 565 OF 1411

(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. HOWARD, DENISE, A., ,

Mailing Address 5582 Levi Kramer Blvd.

City

Canal Winchester

State

OH

Zip Code

43110

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

INVENTORY CONTROL SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

414.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209598

Amount of Each Receipt this Period

18.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOWARD, DENISE, A., ,

Mailing Address 5582 Levi Kramer Blvd.

City

Canal Winchester

State

OH

Zip Code

43110

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

INVENTORY CONTROL SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210243

Amount of Each Receipt this Period

18.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOWARD, DONNA, R., ,

Mailing Address 2462 Meredith Drive

City

Columbus

State

OH

Zip Code

43219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

CUSTOMER SERVICES ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208968

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

51.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 566 OF 1411

(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. HOWARD, DONNA, R., ,

Mailing Address 2462 Meredith Drive

City
Columbus

State
OH

Zip Code
43219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
CUSTOMER SERVICES ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209599

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOWARD, DONNA, R., ,

Mailing Address 2462 Meredith Drive

City
Columbus

State
OH

Zip Code
43219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
CUSTOMER SERVICES ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210244

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOWARD, JESSE, J., ,

Mailing Address 2749 Heather Lane NW

City
Warren

State
OH

Zip Code
44485

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 ▼

207.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209600

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

39.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 567 OF 1411

(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. HOWARD, JESSE, J., ,

Mailing Address 2749 Heather Lane NW

City
WarrenState
OHZip Code
44485FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210245

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOWARD, NATHAN, L., ,

Mailing Address 7608 Irving Avenue North

City
MinneapolisState
MNZip Code
55444FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MNOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	01	2018

Transaction ID : SA11AI.211691

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOWARD, RACINE, , ,

Mailing Address 8906 Chinaberry Circle North

City
MacedoniaState
OHZip Code
44056FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

229.24

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	06	2018

Transaction ID : SA11AI.210900

Amount of Each Receipt this Period

20.84

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

59.84

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 568 OF 1411

(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. HOWELL, JAMES, E., ,

Mailing Address 620 Scrubgrass Road

 City
 Pittsburgh

 State
 PA

 Zip Code
 15243

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME INT'L

 Occupation (for Individual)
 REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.206316

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOWELL, JAMES, E., ,

Mailing Address 620 Scrubgrass Road

 City
 Pittsburgh

 State
 PA

 Zip Code
 15243

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME INT'L

 Occupation (for Individual)
 REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.206687

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOWELL, TINA, M., ,

Mailing Address 6662 Fairway Circle

 City
 Windsor

 State
 WI

 Zip Code
 53598

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME INT'L

 Occupation (for Individual)
 REGIONAL FIELD ADMINISTRATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.206317

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 569 OF 1411

(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. HOWELL, TINA, M., ,

Mailing Address 6662 Fairway Circle

City
Windsor

State
WI

Zip Code
53598

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

REGIONAL FIELD ADMINISTRATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

782.02

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206688

Amount of Each Receipt this Period

37.72

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOWERTER, STEPHEN, M., ,

Mailing Address P.O. Box 361

City
Cuba

State
IL

Zip Code
61427

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

CORRECTIONAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208224

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOWSON, CHERYL, , ,

Mailing Address 7677 Roundhouse Road

City
New Marshfield

State
OH

Zip Code
45766

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH CN 8

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

202.02

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.210808

Amount of Each Receipt this Period

9.62

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

97.34

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 570 OF 1411

(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. HOWSON, CHERYL, , ,

Mailing Address 7677 Roundhouse Road

City

New Marshfield

State

OH

Zip Code

45766

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH CN 8

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M	D D	Y Y Y Y
11	06	2018

Transaction ID : SA11AI.210809

Amount of Each Receipt this Period

9.62

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOWSON, CHERYL, , ,

Mailing Address 7677 Roundhouse Road

City

New Marshfield

State

OH

Zip Code

45766

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH CN 8

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.26

Date of Receipt

M M	D D	Y Y Y Y
11	19	2018

Transaction ID : SA11AI.210901

Amount of Each Receipt this Period

9.62

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOYLE, MELANIE, S., ,

Mailing Address 2635 Huntington Road

City

Springfield

State

IL

Zip Code

62703

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

ADMIN ASSISTANT I

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1784.00

Date of Receipt

M M	D D	Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208225

Amount of Each Receipt this Period

84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

103.24

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 571 OF 1411

(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. HUBBARD, JILL, M., ,

Mailing Address 1729 S Lincoln Avenue

City
Springfield

State
IL

Zip Code
62704

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
REVENUE TAX SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208226

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HUBBERT, SHIRLEY, A., ,

Mailing Address 1078 E 26th Avenue

City
Columbus

State
OH

Zip Code
43211

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ACCOUNTANT/EXAMINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210246

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HUDSON, REGINA, G., ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 25 / 2018

Transaction ID : SA11AI.207428

Amount of Each Receipt this Period

12.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

50.50

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 572 OF 1411

(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. HUDSON, REGINA, G., ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.207629

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HUDSON, REGINA, G., ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

11 / 26 / 2018

Transaction ID : SA11AI.207852

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HUDSON, RONALD, , ,

Mailing Address 29 N Wacker

City
Chicago

State
IL

Zip Code
60606

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

848.60

Date of Receipt

11 / 05 / 2018

Transaction ID : SA11AI.208227

Amount of Each Receipt this Period

84.86

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

108.86

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 573 OF 1411

(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. HUEY, ROBERT, G., ,

Mailing Address 3123 School Street

City
Kingsville

State
OH

Zip Code
44048

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HIGHWAY TECHNICIAN III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208971

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HUEY, ROBERT, G., ,

Mailing Address 3123 School Street

City
Kingsville

State
OH

Zip Code
44048

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HIGHWAY TECHNICIAN III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209602

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HUEY, ROBERT, G., ,

Mailing Address 3123 School Street

City
Kingsville

State
OH

Zip Code
44048

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HIGHWAY TECHNICIAN III

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210247

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 574 OF 1411

(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. HUFF, DAVID, C., ,

Mailing Address 207 Oswald Drive

City
Union

State
OH

Zip Code
45322

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH CN 8/DAYTON METROHEALTH

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.03

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 23 / 2018

Transaction ID : SA11AI.210810

Amount of Each Receipt this Period

9.61

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HUFF, DAVID, C., ,

Mailing Address 207 Oswald Drive

City
Union

State
OH

Zip Code
45322

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH CN 8/DAYTON METROHEALTH

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.64

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210811

Amount of Each Receipt this Period

9.61

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HUFF, DAVID, C., ,

Mailing Address 207 Oswald Drive

City
Union

State
OH

Zip Code
45322

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH CN 8/DAYTON METROHEALTH

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.25

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 21 / 2018

Transaction ID : SA11AI.210902

Amount of Each Receipt this Period

9.61

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

28.83

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 575 OF 1411

(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. HUFFMAN, AMY, M., ,

Mailing Address 3203 9th Street Court

City

East moline

State

IL

Zip Code

61244

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

HUMAN SERVICES CASEWORKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208228

Amount of Each Receipt this Period

30.00



Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HUGGINS, SAMUEL, M., ,

Mailing Address 235 Scenic Hill Drive

City

Carnegie

State

PA

Zip Code

15106

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ASSIST. DIRECTOR, ORGANIZNG & I

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1214.40

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206318

Amount of Each Receipt this Period

58.22



Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HUGGINS, SAMUEL, M., ,

Mailing Address 235 Scenic Hill Drive

City

Carnegie

State

PA

Zip Code

15106

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ASSIST. DIRECTOR, ORGANIZNG & F

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

1274.22

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206689

Amount of Each Receipt this Period

59.82



Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

148.04

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 576 OF 1411

(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. HUGHES, ALYSON, L., , Mailing Address 5932 Chicken Bristol Road <table border="1"> <tr> <td>City Rochester</td> <td>State IL</td> <td>Zip Code 62563</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1"> <tr> <td>Name of Employer (for Individual) AFSCME IL RET CHPT 31</td> <td>Occupation (for Individual) RETIREE</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00			City Rochester	State IL	Zip Code 62563	Name of Employer (for Individual) AFSCME IL RET CHPT 31	Occupation (for Individual) RETIREE	Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td>18</td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.208404 Amount of Each Receipt this Period 25.00 ☐ Memo Item		M M M	D D D	Y Y Y Y Y Y	10	18	2018
City Rochester	State IL	Zip Code 62563													
Name of Employer (for Individual) AFSCME IL RET CHPT 31	Occupation (for Individual) RETIREE														
M M M	D D D	Y Y Y Y Y Y													
10	18	2018													
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. HUGHES, ALYSON, L., , Mailing Address 5932 Chicken Bristol Road <table border="1"> <tr> <td>City Rochester</td> <td>State IL</td> <td>Zip Code 62563</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1"> <tr> <td>Name of Employer (for Individual) AFSCME IL RET CHPT 31</td> <td>Occupation (for Individual) RETIREE</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			City Rochester	State IL	Zip Code 62563	Name of Employer (for Individual) AFSCME IL RET CHPT 31	Occupation (for Individual) RETIREE	Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td>05</td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.208405 Amount of Each Receipt this Period 25.00 ☐ Memo Item		M M M	D D D	Y Y Y Y Y Y	11	05	2018
City Rochester	State IL	Zip Code 62563													
Name of Employer (for Individual) AFSCME IL RET CHPT 31	Occupation (for Individual) RETIREE														
M M M	D D D	Y Y Y Y Y Y													
11	05	2018													
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. HUGHES, FRANK, P., , Mailing Address 5932 Chicken bristle <table border="1"> <tr> <td>City Rochester</td> <td>State IL</td> <td>Zip Code 62563</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1"> <tr> <td>Name of Employer (for Individual) AFSCME IL CN 31/STATE OF IL</td> <td>Occupation (for Individual) PUBLIC SVC ADMINISTRATOR</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) Aggregate Year-to-Date ▼ 440.00			City Rochester	State IL	Zip Code 62563	Name of Employer (for Individual) AFSCME IL CN 31/STATE OF IL	Occupation (for Individual) PUBLIC SVC ADMINISTRATOR	Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td>05</td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.208229 Amount of Each Receipt this Period 44.00 ☐ Memo Item		M M M	D D D	Y Y Y Y Y Y	11	05	2018
City Rochester	State IL	Zip Code 62563													
Name of Employer (for Individual) AFSCME IL CN 31/STATE OF IL	Occupation (for Individual) PUBLIC SVC ADMINISTRATOR														
M M M	D D D	Y Y Y Y Y Y													
11	05	2018													
SUBTOTAL of Receipts This Page (optional)..... ▶			94.00												
TOTAL This Period (last page this line number only)..... ▶															

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 577 OF 1411

(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. HUGHES, JACK, E., ,Mailing Address 190 W. Ostend Street
Suite 101City
BaltimoreState
MDZip Code
21230FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MD CN 3Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.32

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	07	2018

Transaction ID : SA11AI.211319

Amount of Each Receipt this Period

60.08

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HUGHES, JEFFREY, , ,Mailing Address 190 W. Ostend Street
Suite 101City
BaltimoreState
MDZip Code
21230FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MD CN 3Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.48

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	07	2018

Transaction ID : SA11AI.211320

Amount of Each Receipt this Period

61.12

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HUGHES, SUSAN, M., ,

Mailing Address 6005 Cory Court SE

City
LaceyState
WAZip Code
98513FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28Occupation (for Individual)
FINANCIAL MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	14	2018

Transaction ID : SA11AI.207853

Amount of Each Receipt this Period

21.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

142.20

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 578 OF 1411

(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. HUGHEY, JOSEPH, , ,

Mailing Address 5401 Gallatin Street

City
HyattsvilleState
MDZip Code
20781FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
STAFF ACCOUNTANT III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1054.64

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206319

Amount of Each Receipt this Period

53.05

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HUGHEY, JOSEPH, , ,

Mailing Address 5401 Gallatin Street

City
HyattsvilleState
MDZip Code
20781FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
STAFF ACCOUNTANT III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1107.69

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	15	2018

Transaction ID : SA11AI.206690

Amount of Each Receipt this Period

53.05

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HUI, CHUNG, N., ,

Mailing Address 12235 Cypress Spring Road

City
ClarksburgState
MDZip Code
20871FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
FINANCE COORDINATOR, POLITICAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1101.64

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206320

Amount of Each Receipt this Period

53.05

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

159.15

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 579 OF 1411

(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. HUI, CHUNG, N., ,

Mailing Address 12235 Cypress Spring Road

City
Clarksburg

State
MD

Zip Code
20871

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

FINANCE COORDINATOR, POLITICAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1154.69

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206691

Amount of Each Receipt this Period

53.05

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HULL, KAAINA, S., ,

Mailing Address 5359 Malino Road

City
Koloa

State
HI

Zip Code
96756

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME HI LOC 152

Occupation (for Individual)

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
11 / 01 / 2018

Transaction ID : SA11AI.210999

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HULTER, DELLA, R., ,

Mailing Address 309 E Vernon Avenue

City
Fergus Falls

State
MN

Zip Code
56537

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)

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
11 / 01 / 2018

Transaction ID : SA11AI.211692

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

93.05

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 580 OF 1411

(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. HUMPHREY, WILSON, C., ,

Mailing Address 6391 Wolcott Court

City
Dublin

State
OH

Zip Code
43017

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
JUVENILE CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210248

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HUMPHRIES, SHIRLEY, M., ,

Mailing Address 409 E Albert Street

City
Lima

State
OH

Zip Code
45804

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 ▼

242.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208973

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HUMPHRIES, SHIRLEY, M., ,

Mailing Address 409 E Albert Street

City
Lima

State
OH

Zip Code
45804

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 ▼

253.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209604

Amount of Each Receipt this Period

11.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 581 OF 1411

(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. HUMPHRIES, SHIRLEY, M., ,

Mailing Address 409 E Albert Street

City
LimaState
OHZip Code
45804FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210249

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HUNLEY, DAWN, M., ,

Mailing Address 215 Grover Street

City

Nelsonville

State

OH

Zip Code

45764

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ODJFS CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2018

Transaction ID : SA11AI.208974

Amount of Each Receipt this Period

20.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HUNLEY, DAWN, M., ,

Mailing Address 215 Grover Street

City

Nelsonville

State

OH

Zip Code

45764

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ODJFS CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

478.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.209605

Amount of Each Receipt this Period

20.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

52.00

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 582 OF 1411

(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. HUNLEY, DAWN, M., ,

Mailing Address 215 Grover Street

City
Nelsonville

State
OH

Zip Code
45764

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ODJFS CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210250

Amount of Each Receipt this Period

20.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HUNSBARGER, DONALD, A., ,

Mailing Address 1253 Red Tail Hawk Court
Unit 6

City
Boardman

State
OH

Zip Code
44512

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 ▼

286.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208975

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HUNSBARGER, DONALD, A., ,

Mailing Address 1253 Red Tail Hawk Court
Unit 6

City
Boardman

State
OH

Zip Code
44512

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 ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209606

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

46.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 583 OF 1411

(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. HUNSBARGER, DONALD, A., ,

Mailing Address 1253 Red Tail Hawk Court
Unit 6

City Boardman State OH Zip Code 44512

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 ▼

312.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210251

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HUNT, DAN, , ,

Mailing Address 35992 Woodbridge Circle
#8

City Farmington Hills State MI Zip Code 48535

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MI CN 25

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211339

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HUNT, DAN, , ,

Mailing Address 35992 Woodbridge Circle
#8

City Farmington Hills State MI Zip Code 48535

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MI CN 25

Occupation (for Individual)
STAFF 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
11 / 20 / 2018

Transaction ID : SA11AI.211386

Amount of Each Receipt this Period

10.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

34.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 584 OF 1411

(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. HUNTER, JOAN, D., ,

Mailing Address 2215 Arlington Avenue

City
MiddletownState
OHZip Code
45044FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208976

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HUNTER, JOAN, D., ,

Mailing Address 2215 Arlington Avenue

City
MiddletownState
OHZip Code
45044FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209607

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HUNTER, JOAN, D., ,

Mailing Address 2215 Arlington Avenue

City
MiddletownState
OHZip Code
45044FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210252

Amount of Each Receipt this Period

10.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

31.50

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 585 OF 1411

(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. HUNTER, SANDRA, K., ,

Mailing Address 622 Wilson Street

 City
 Winona

 State
 MN

 Zip Code
 55987

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME MN CN 5/STATE OF MN

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.211693

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HUNTER, YVONNE, , ,

Mailing Address 931 Rosamond Avenue

 City
 Akron

 State
 OH

 Zip Code
 44307

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.208977

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HUNTER, YVONNE, , ,

Mailing Address 931 Rosamond Avenue

 City
 Akron

 State
 OH

 Zip Code
 44307

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.209608

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 586 OF 1411

(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. HUNTER, YVONNE, , ,

Mailing Address 931 Rosamond Avenue

City
Akron

State
OH

Zip Code
44307

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210253

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HUNTSINGER, TRAVIS, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 09 / 2018

Transaction ID : SA11AI.207630

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HUNTSINGER, TRAVIS, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 26 / 2018

Transaction ID : SA11AI.207854

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 587 OF 1411

(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. HURT, DARREN, C., ,

Mailing Address 3126 Sun Valley Drive

City
PickeringtonState
OHZip Code
43147FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
INVENTORY CONTROL SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.208978

Amount of Each Receipt this Period

16.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HURT, DARREN, C., ,

Mailing Address 3126 Sun Valley Drive

City
PickeringtonState
OHZip Code
43147FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
INVENTORY CONTROL SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209609

Amount of Each Receipt this Period

16.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HURT, DARREN, C., ,

Mailing Address 3126 Sun Valley Drive

City
PickeringtonState
OHZip Code
43147FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
INVENTORY CONTROL SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

384.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210254

Amount of Each Receipt this Period

16.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

48.00

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 588 OF 1411

(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. IHEME, ERICA, D., ,

Mailing Address 2706 W 43rd Place

City

Los Angeles

State

CA

Zip Code

90008

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2018

Transaction ID : SA11AI.206321

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. IHEME, ERICA, D., ,

Mailing Address 2706 W 43rd Place

City

Los Angeles

State

CA

Zip Code

90008

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 11 / 15 / 2018

Transaction ID : SA11AI.206692

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ILENSTINE, SARAH, , ,

Mailing Address 949 W Harding Avenue

City

Santa Maria

State

CA

Zip Code

93458

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME CA LOC 3930

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2018

Transaction ID : SA11AI.211152

Amount of Each Receipt this Period

21.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

51.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 589 OF 1411

(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. IMBROGNO, MIKE, P, , JR.

Mailing Address 1955 Wisconsin Avenue

City

Downers Grove

State

IL

Zip Code

60515

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1099.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2018

Transaction ID : SA11AI.206322

Amount of Each Receipt this Period

52.07

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. IMBROGNO, MIKE, P, , JR.

Mailing Address 1955 Wisconsin Avenue

City

Downers Grove

State

IL

Zip Code

60515

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1151.72

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2018

Transaction ID : SA11AI.206693

Amount of Each Receipt this Period

52.07

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. INMAN, DOUGLAS, B., ,

Mailing Address 2490 Wilshire Road

City

Cortland

State

OH

Zip Code

44410

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 ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2018

Transaction ID : SA11AI.208979

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

114.14

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 590 OF 1411

(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. INMAN, DOUGLAS, B., ,

Mailing Address 2490 Wilshire Road

City
CortlandState
OHZip Code
44410FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209610

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. INMAN, DOUGLAS, B., ,

Mailing Address 2490 Wilshire Road

City
CortlandState
OHZip Code
44410FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210255

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. INSINGA-MINSER, CARLA, , ,

Mailing Address 4287 South Carolina Drive

City
Blue RidgeState
PAZip Code
17112FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13Occupation (for Individual)
ORGANIZING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1580.26

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	08	2018

Transaction ID : SA11AI.207064

Amount of Each Receipt this Period

125.24

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

145.24

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 591 OF 1411

(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. IRBY, BRENDA, , ,

Mailing Address 3114 E Bayview Lane

City
Sandusky

State
OH

Zip Code
44870

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HOSPITAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209611

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. IRBY, BRENDA, , ,

Mailing Address 3114 E Bayview Lane

City
Sandusky

State
OH

Zip Code
44870

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HOSPITAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210256

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. IRVING, ANNE, , ,

Mailing Address 5243 N. Lind Avenue

City
Chicago

State
IL

Zip Code
60630

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31

Occupation (for Individual)
DIRECTOR OF PUBLIC POLICY

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

876.21

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208230

Amount of Each Receipt this Period

87.62

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.62

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 592 OF 1411

(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. IRWIN, JAMES, , ,

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 ▼

630.66

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207065

Amount of Each Receipt this Period

54.84

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. IRWIN, LISA, L., ,

Mailing Address 402 Hamilton Street

City
McKees Rock

State
PA

Zip Code
15136

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)
TUNNEL MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.207066

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ISHITANI, JACK, , ,

Mailing Address 359 E 5th Avenue

City
Spokane

State
WA

Zip Code
99202

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 09 / 2018

Transaction ID : SA11AI.207631

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

76.84

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ISHITANI, JACK, , ,

Mailing Address 359 E 5th Avenue

City
SpokaneState
WAZip Code
99202FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	26	2018

Transaction ID : SA11AI.207855

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ISHMAEL, ANNA, L., ,

Mailing Address 907 Douglas Avenue

City
AuroraState
ILZip Code
60505FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
ZONING INSPECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.83

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208231

Amount of Each Receipt this Period

19.23

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ISON, GINA, M., ,

Mailing Address 390 Worthington Road

City
WestervilleState
OHZip Code
43082FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	06	2018

Transaction ID : SA11AI.210257

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

59.23

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 594 OF 1411

(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. IYALL, ROBERT, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 09 / 2018

Transaction ID : SA11AI.207632

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. IYALL, ROBERT, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 26 / 2018

Transaction ID : SA11AI.207856

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. IZRAL, ROBERT, M., ,

Mailing Address 2100 39th Avenue

City
Sterling

State
IL

Zip Code
61081

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
PSYCHOLOGIST III

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

441.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208232

Amount of Each Receipt this Period

42.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

62.00

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 595 OF 1411

(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. JACINTO, JEROME, B., ,

Mailing Address P.O. Box 3008

City
Springfield

State
IL

Zip Code
62708

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

INFORMATION SYSTEMS ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208233

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JACKSON, CAROLYN, S., ,

Mailing Address 2650 Glenbriar Street

City
Columbus

State
OH

Zip Code
43232

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

ODJFS CUSTOMER REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208981

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JACKSON, CAROLYN, S., ,

Mailing Address 2650 Glenbriar Street

City
Columbus

State
OH

Zip Code
43232

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

ODJFS CUSTOMER REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209612

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

101.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 596 OF 1411
(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 EFull Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. JACKSON, CAROLYN, S., ,

Mailing Address 2650 Glenbriar Street

City
ColumbusState
OHZip Code
43232FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ODJFS CUSTOMER REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	3			2	0	1	8		

Transaction ID : SA11AI.210258

Amount of Each Receipt this Period

13.00

☐ Memo ItemFull Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. JACKSON, CEOLA, , ,

Mailing Address P.O. Box 67

City
RichmondState
VAZip Code
64085FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
ORGANIZER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

707.30

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			3	1			2	0	1	8		

Transaction ID : SA11AI.206323

Amount of Each Receipt this Period

35.67

☐ Memo ItemFull Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. JACKSON, CEOLA, , ,

Mailing Address P.O. Box 67

City
RichmondState
VAZip Code
64085FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
ORGANIZER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

742.97

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			1	5			2	0	1	8		

Transaction ID : SA11AI.206694

Amount of Each Receipt this Period

35.67

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

84.34

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 597 OF 1411

(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. JACKSON, DAN, , ,

Mailing Address 2304 N 23rd Road

City
Marseilles

State
IL

Zip Code
61341

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
MILITARY MAINT ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.60

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208234

Amount of Each Receipt this Period

41.66

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JACKSON, DARREN, A., ,

Mailing Address 4713 E. 86th Street

City
Garfield Height

State
OH

Zip Code
44125

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
WORKERS COMPENSATION CLAIMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208982

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JACKSON, DARREN, A., ,

Mailing Address 4713 E. 86th Street

City
Garfield Height

State
OH

Zip Code
44125

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
WORKERS COMPENSATION CLAIMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209613

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

61.66

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 598 OF 1411

(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. JACKSON, DARREN, A., ,

Mailing Address 4713 E. 86th Street

City
Garfield Height

State
OH

Zip Code
44125

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
WORKERS COMPENSATION CLAIMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210259

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JACKSON, GRETA, , ,

Mailing Address 190 W. Ostend Street
Suite 101

City
Baltimore

State
MD

Zip Code
21230

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MD CN 3

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.28

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211321

Amount of Each Receipt this Period

54.66

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JACKSON, KEITH, L., ,

Mailing Address 2240 Windsor Drive

City
Saint Louis

State
MO

Zip Code
63033

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ORGANIZER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1511.76

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206324

Amount of Each Receipt this Period

67.44

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

132.10

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 599 OF 1411

(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. JACKSON, KEITH, L., ,

Mailing Address 2240 Windsor Drive

City
Saint Louis

State
MO

Zip Code
63033

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ORGANIZER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1581.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206695

Amount of Each Receipt this Period

70.01

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JACKSON, LATONIA, , ,

Mailing Address 155 tilden Lane

City
Bolingbrook

State
IL

Zip Code
60440

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
CORRECTIONS OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208235

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JACKSON, PATTY, , ,

Mailing Address 1965 Merryhill Drive

City
Columbus

State
OH

Zip Code
43219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
SENIOR SOURCING ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208983

Amount of Each Receipt this Period

15.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

106.51

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 600 OF 1411

(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. JACKSON, PATTY, , ,

Mailing Address 1965 Merryhill Drive

City
ColumbusState
OHZip Code
43219FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
SENIOR SOURCING ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.50

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	9			2	0	1	8		

Transaction ID : SA11AI.209614

Amount of Each Receipt this Period

15.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JACKSON, PATTY, , ,

Mailing Address 1965 Merryhill Drive

City
ColumbusState
OHZip Code
43219FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
SENIOR SOURCING ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	3			2	0	1	8		

Transaction ID : SA11AI.210260

Amount of Each Receipt this Period

15.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JACKSON, STEVEN, G., ,

Mailing Address 12294 Island Road

City
GraftonState
OHZip Code
44044FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	9			2	0	1	8		

Transaction ID : SA11AI.209615

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

40.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 601 OF 1411

(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. JACKSON, STEVEN, G., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 12294 Island Road City Grafton State OH Zip Code 44044 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 ▼ 216.00			Date of Receipt M M / D D / Y Y Y Y Y 11 / 23 / 2018 Transaction ID : SA11AI.210261 Amount of Each Receipt this Period 9.00 ☐ Memo Item
B. JACKSON, YOLANDA, C., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 27400 Chardon Road Apt. 1037 City Willoughby Hill State OH Zip Code 44092 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH Occupation (for Individual) THERAPUTIC PROGRAM TECHNICIA Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 207.00			Date of Receipt M M / D D / Y Y Y Y Y 11 / 09 / 2018 Transaction ID : SA11AI.209616 Amount of Each Receipt this Period 9.00 ☐ Memo Item
C. JACKSON, YOLANDA, C., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 27400 Chardon Road Apt. 1037 City Willoughby Hill State OH Zip Code 44092 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH Occupation (for Individual) THERAPUTIC PROGRAM TECHNICIA Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 216.00			Date of Receipt M M / D D / Y Y Y Y Y 11 / 23 / 2018 Transaction ID : SA11AI.210262 Amount of Each Receipt this Period 9.00 ☐ Memo Item
SUBTOTAL of Receipts This Page (optional)..... ▶			27.00
TOTAL This Period (last page this line number only)..... ▶			

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 602 OF 1411
(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. JACOBS, EMILY, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.207633

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JACOBS, EMILY, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2018

Transaction ID : SA11AI.207857

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JAHNKE, CYNTHIA, K., ,

Mailing Address 4406 Pillsbury Avenue S

City
MinneapolisState
MNZip Code
55419FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MNOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2018

Transaction ID : SA11AI.211694

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

40.00

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 603 OF 1411

(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. JAMES, CHERYL, , ,

Mailing Address 1234 Massachusetts Avenue NW
Apt. 404

City
Washington

State
DC

Zip Code
20005

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
OFFICE ASSISTANT III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

631.92

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206325

Amount of Each Receipt this Period

30.02

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JAMES, CHERYL, , ,

Mailing Address 1234 Massachusetts Avenue NW
Apt. 404

City
Washington

State
DC

Zip Code
20005

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
OFFICE ASSISTANT III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

661.94

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206696

Amount of Each Receipt this Period

30.02

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JAMES, JONATHAN, , ,

Mailing Address 376 E Mark Street

City
Marion

State
OH

Zip Code
43302

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208986

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.04

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 604 OF 1411

(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. JAMES, JONATHAN, , ,

Mailing Address 376 E Mark Street

City
Marion

State
OH

Zip Code
43302

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 ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209617

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JAMES, JONATHAN, , ,

Mailing Address 376 E Mark Street

City
Marion

State
OH

Zip Code
43302

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 ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210263

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JAMISON, JOCELYN, , ,

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 ▼

369.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207067

Amount of Each Receipt this Period

33.56

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

53.56

TOTAL This Period (last page this line number only).....▶

X	11a		11b		11c		12		
	13		14		15		16		17

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

FEC Schedule A (Form 3X) Rev. 06/2016

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 606 OF 1411

(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. JAY, JOSEPH, , , Mailing Address 29 N. Wacker Drive Suite 800 City Chicago State IL Zip Code 60606 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME IL CN 31 Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt 11 / 05 / 2018 Transaction ID : SA11AI.208236 Amount of Each Receipt this Period 30.00 ☐ Memo Item
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. JAYNE, EDWIN, S., , Mailing Address 3304 Alabama Avenue City Alexandria State VA Zip Code 22305 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME INT'L Occupation (for Individual) ASSOCIATE DIRECTOR, FED GOVT , Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 1299.20		Date of Receipt 10 / 31 / 2018 Transaction ID : SA11AI.206326 Amount of Each Receipt this Period 62.71 ☐ Memo Item
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. JAYNE, EDWIN, S., , Mailing Address 3304 Alabama Avenue City Alexandria State VA Zip Code 22305 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME INT'L Occupation (for Individual) ASSOCIATE DIRECTOR, FED GOVT A Receipt For: ☐ Primary ☐ General ☐ Other (specify) Aggregate Year-to-Date ▼ 1361.91		Date of Receipt 11 / 15 / 2018 Transaction ID : SA11AI.206697 Amount of Each Receipt this Period 62.71 ☐ Memo Item
SUBTOTAL of Receipts This Page (optional).....▶		155.42
TOTAL This Period (last page this line number only).....▶		

X	11a		11b		11c		12		
	13		14		15		16		17

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

FEC Schedule A (Form 3X) Rev. 06/2016

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 608 OF 1411
(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. JEFFERSON, LEAUNTI, D., ,

Mailing Address 138 Bowman Street

City
MansfieldState
OHZip Code
44903FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
GENERAL ACTIVITIES TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	3			2	0	1	8		

Transaction ID : SA11AI.210264

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JENKINS, ASHLEY, N., ,Mailing Address 2109 Piney Branch Circle
#270City
HanoverState
MDZip Code
21076FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
FIELD COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

921.71

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			3	1			2	0	1	8		

Transaction ID : SA11AI.206327

Amount of Each Receipt this Period

46.58

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JENKINS, ASHLEY, N., ,Mailing Address 2109 Piney Branch Circle
#270City
HanoverState
MDZip Code
21076FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
FIELD COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

968.29

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			1	5			2	0	1	8		

Transaction ID : SA11AI.206698

Amount of Each Receipt this Period

46.58

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

103.16

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 609 OF 1411

(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. JENKINS, JACQUELINE, , ,Mailing Address 1425 Pioneer Road
Apt. 5City
CresthillState
ILZip Code
60435FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
CORRECTIONAL OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2018			

Transaction ID : SA11AI.208237

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JENKINS, PAMELA, L., ,

Mailing Address 47604 Sandbank Square

City

Potomac Falls

State

VA

Zip Code

20165

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
SPECIAL ASSISTANT TO THE PRESI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1947.40

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2018			

Transaction ID : SA11AI.206328

Amount of Each Receipt this Period

95.37

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JENKINS, PAMELA, L., ,

Mailing Address 47604 Sandbank Square

City

Potomac Falls

State

VA

Zip Code

20165

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
SPECIAL ASSISTANT TO THE PRESI

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2042.77

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2018			

Transaction ID : SA11AI.206699

Amount of Each Receipt this Period

95.37

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

232.74

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 610 OF 1411
(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. JENKINS, ROCHELLE, C., ,

Mailing Address 6800 N High Street

City
WorthingtonState
OHZip Code
43085FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/METROHEALTHOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2018

Transaction ID : SA11AI.210903

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JENNINGS, KIMBERLY, A., ,

Mailing Address 1716 Niagara Road

City
ColumbusState
OHZip Code
43227FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ODJFS CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.209619

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JENNINGS, KIMBERLY, A., ,

Mailing Address 1716 Niagara Road

City
ColumbusState
OHZip Code
43227FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ODJFS CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210265

Amount of Each Receipt this Period

9.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

28.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 611 OF 1411

(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. JENNINGS, LYNDIA, , ,

Mailing Address 1649 Franklin Park S.

City
ColumbusState
OHZip Code
43205FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ADMINISTRATIVE SECRETARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2018			

Transaction ID : SA11AI.208989

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JENNINGS, LYNDIA, , ,

Mailing Address 1649 Franklin Park S.

City
ColumbusState
OHZip Code
43205FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ADMINISTRATIVE SECRETARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			09			2018			

Transaction ID : SA11AI.209620

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JENNINGS, LYNDIA, , ,

Mailing Address 1649 Franklin Park S.

City
ColumbusState
OHZip Code
43205FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ADMINISTRATIVE SECRETARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			23			2018			

Transaction ID : SA11AI.210266

Amount of Each Receipt this Period

12.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

36.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JENSEN, CATHARINE, J., ,

Mailing Address 1012 Juno Avenue

City
Saint PaulState
MNZip Code
55102FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MNOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	01	2018

Transaction ID : SA11AI.211698

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JIMENEZ, AMALIA, A., ,

Mailing Address 7204 Leesville Blvd.

City
SpringfieldState
VAZip Code
22151FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
OFFICE ASSISTANT II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

482.72

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206329

Amount of Each Receipt this Period

24.28

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JIMENEZ, AMALIA, A., ,

Mailing Address 7204 Leesville Blvd.

City
SpringfieldState
VAZip Code
22151FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
OFFICE ASSISTANT II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

507.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	15	2018

Transaction ID : SA11AI.206700

Amount of Each Receipt this Period

24.28

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

68.56

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 613 OF 1411

(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. JOHANSEN, KAJ, A., ,

Mailing Address P.O. Box 8008

City
Saint PaulState
MNZip Code
55108FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MNOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	01	2018

Transaction ID : SA11AI.211699

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNSON, AARON, E., ,

Mailing Address 15 Grace Avenue

City
ShelbyState
OHZip Code
44875FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210267

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNSON, BUNNIE, M., ,

Mailing Address 6959 S Vernon Avenue

City
ChicagoState
ILZip Code
60637FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
HUMAN SRVC CASEWORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

218.82

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208238

Amount of Each Receipt this Period

31.26

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

59.76

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 614 OF 1411
(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. JOHNSON, CARRIE, V., ,

Mailing Address 10561 Cranwood Court

City
CincinnatiState
OHZip Code
45240FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
SECRETARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.208991

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNSON, CARRIE, V., ,

Mailing Address 10561 Cranwood Court

City
CincinnatiState
OHZip Code
45240FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
SECRETARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209622

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNSON, CARRIE, V., ,

Mailing Address 10561 Cranwood Court

City
CincinnatiState
OHZip Code
45240FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
SECRETARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210268

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

45.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 615 OF 1411

(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. JOHNSON, CHAD, G., ,

Mailing Address 245 S. Allen Avenue
Apt. 4

City
Pasadena

State
CA

Zip Code
91106

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA CN 57

Occupation (for Individual)
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 Y
10 / 24 / 2018

Transaction ID : SA11AI.211233

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNSON, CHARLES, A., ,

Mailing Address 366 Strouse Lane

City

South Salem

State
OH

Zip Code
45681

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
TRANSPORTATION TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.208992

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNSON, CHARLES, A., ,

Mailing Address 366 Strouse Lane

City

South Salem

State
OH

Zip Code
45681

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
TRANSPORTATION TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209623

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 616 OF 1411
(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. JOHNSON, CHARLES, A., ,

Mailing Address 366 Strouse Lane

City
South SalemState
OHZip Code
45681FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
TRANSPORTATION TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210269

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNSON, CURTIS, E., ,

Mailing Address 7236 Eastlawn Drive

City
CincinnatiState
OHZip Code
45237FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2018

Transaction ID : SA11AI.208993

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNSON, CURTIS, E., ,

Mailing Address 7236 Eastlawn Drive

City
CincinnatiState
OHZip Code
45237FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.209624

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

30.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 617 OF 1411

(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. JOHNSON, CURTIS, E., ,

Mailing Address 7236 Eastlawn Drive

City
CincinnatiState
OHZip Code
45237FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M	D D	Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210270

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNSON, DARLENE, A., ,Mailing Address 2701 S Indiana Avenue
#803City
ChicagoState
ILZip Code
60616FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
LABORATORY QUALITY SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M	D D	Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208239

Amount of Each Receipt this Period

38.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNSON, DEBORAH, J., ,

Mailing Address 313 S Main Street

City
WilliamsportState
OHZip Code
43164FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M	D D	Y Y Y Y
10	26	2018

Transaction ID : SA11AI.208994

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

58.46

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 618 OF 1411
(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. JOHNSON, DEBORAH, J., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 313 S Main Street City Williamsport State OH Zip Code 43164 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH Occupation (for Individual) ADMINISTRATIVE ASSISTANT Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 230.00			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 09 / 2018 Transaction ID : SA11AI.209625 Amount of Each Receipt this Period 10.00 ☐ Memo Item
B. JOHNSON, DEBORAH, J., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 313 S Main Street City Williamsport State OH Zip Code 43164 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH Occupation (for Individual) ADMINISTRATIVE ASSISTANT Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 23 / 2018 Transaction ID : SA11AI.210271 Amount of Each Receipt this Period 10.00 ☐ Memo Item
C. JOHNSON, DONNELLA, K., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 2695 Atwood Terrace City Columbus State OH Zip Code 43211 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH Occupation (for Individual) CUSTOMER SERVICE REP Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 204.00			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 23 / 2018 Transaction ID : SA11AI.210272 Amount of Each Receipt this Period 8.50 ☐ Memo Item
SUBTOTAL of Receipts This Page (optional)..... ▶			28.50
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 619 OF 1411

(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. JOHNSON, ERIC, T., ,

Mailing Address 4 Brad Drive

City
Glen Carbon

State
IL

Zip Code
62034

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

HUMAN SERVICES CASEWORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.44

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208240

Amount of Each Receipt this Period

41.68

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNSON, ETHEL, L., ,

Mailing Address 7385 Bentley Station Place

City
Reynoldsburg

State
OH

Zip Code
43068

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210273

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNSON, GERALD, L., ,

Mailing Address 1403 Huntington Avenue

City
Sandusky

State
OH

Zip Code
44870

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

HOSPITAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.210633

Amount of Each Receipt this Period

26.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

76.18

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 620 OF 1411

(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. JOHNSON, GERALD, L., ,

Mailing Address 1403 Huntington Avenue

City
Sandusky

State
OH

Zip Code
44870

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HOSPITAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.210634

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNSON, HELEN, J., ,

Mailing Address 837 Koebel Avenue

City
Columbus

State
OH

Zip Code
43207

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

609.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210904

Amount of Each Receipt this Period

55.66

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNSON, JOHN, F., ,

Mailing Address 3135 Parsons Avenue

City
Columbus

State
OH

Zip Code
43207

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

882.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210905

Amount of Each Receipt this Period

94.24

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

162.90

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 621 OF 1411
(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. JOHNSON, JOHNNY, L., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 2321 Thornton Road <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">City Harrisburg</td> <td style="width: 16%;">State PA</td> <td style="width: 51%;">Zip Code 17109</td> </tr> </table> FEC ID number of contributing federal political committee. C			City Harrisburg	State PA	Zip Code 17109	Date of Receipt M M / D D / Y Y Y Y Y 10 / 31 / 2018 Transaction ID : SA11AI.207069 Amount of Each Receipt this Period 20.00 ☐ Memo Item
City Harrisburg	State PA	Zip Code 17109				
Name of Employer (for Individual) AFSCME PA CN 13/STATE OF PA Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼			Aggregate Year-to-Date ▼ 220.00			

B. JOHNSON, KIMBERLY, K., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 1727 207th Lane NE <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">City East Bethel</td> <td style="width: 16%;">State MN</td> <td style="width: 51%;">Zip Code 55011</td> </tr> </table> FEC ID number of contributing federal political committee. C			City East Bethel	State MN	Zip Code 55011	Date of Receipt M M / D D / Y Y Y Y Y 11 / 01 / 2018 Transaction ID : SA11AI.211700 Amount of Each Receipt this Period 40.00 ☐ Memo Item
City East Bethel	State MN	Zip Code 55011				
Name of Employer (for Individual) AFSCME MN CN 5/STATE OF MN Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼			Aggregate Year-to-Date ▼ 260.00			

C. JOHNSON, MARY, K., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 1918 Hitchcock <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">City Downers Grove</td> <td style="width: 16%;">State IL</td> <td style="width: 51%;">Zip Code 60515</td> </tr> </table> FEC ID number of contributing federal political committee. C			City Downers Grove	State IL	Zip Code 60515	Date of Receipt M M / D D / Y Y Y Y Y 10 / 18 / 2018 Transaction ID : SA11AI.208407 Amount of Each Receipt this Period 25.00 ☐ Memo Item
City Downers Grove	State IL	Zip Code 60515				
Name of Employer (for Individual) AFSCME IL RET CHPT 31 Occupation (for Individual) RETIREE Receipt For: ☐ Primary ☐ General ☐ Other (specify)			Aggregate Year-to-Date ▼ 225.00			

SUBTOTAL of Receipts This Page (optional)..... ▶	 85.00
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 622 OF 1411

(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. JOHNSON, MARY, K., ,

Mailing Address 1918 Hitchcock

City

Downers Grove

State

IL

Zip Code

60515

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL RET CHPT 31

Occupation (for Individual)

RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208408

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNSON, MICHAEL, A., ,

Mailing Address 1260 Sherwood Drive

City

Bucyrus

State

OH

Zip Code

44820

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 ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209628

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNSON, MICHAEL, A., ,

Mailing Address 1260 Sherwood Drive

City

Bucyrus

State

OH

Zip Code

44820

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 ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210274

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

43.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 623 OF 1411

(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. JOHNSON, RICHARD, , ,

Mailing Address 157 Rose

City
Plymouth

State
MI

Zip Code
48170

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MI CN 25

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211340

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNSON, RICHARD, , ,

Mailing Address 157 Rose

City
Plymouth

State
MI

Zip Code
48170

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MI CN 25

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 20 / 2018

Transaction ID : SA11AI.211387

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNSON, RICHARD, H., ,

Mailing Address 75 Willard Avenue

City
Bedford

State
OH

Zip Code
44146

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
TRAINING OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210275

Amount of Each Receipt this Period

8.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

28.50

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 624 OF 1411

(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. JOHNSON, SETH, M., ,

Mailing Address 727 7th Street NE

City
Washington

State
DC

Zip Code
20002

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
DIRECTOR, DATA AND ANALYTICS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3095.68

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206330

Amount of Each Receipt this Period

148.18

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNSON, SETH, M., ,

Mailing Address 727 7th Street NE

City
Washington

State
DC

Zip Code
20002

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
DIRECTOR, DATA AND ANALYTICS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3243.86

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206701

Amount of Each Receipt this Period

148.18

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNSON, STEVE, , ,

Mailing Address 1607 Summit Lake Shore Road

City
Olympia

State
WA

Zip Code
98502

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/WSECU

Occupation (for Individual)
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
10 / 31 / 2018

Transaction ID : SA11AI.207205

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

316.36

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 625 OF 1411

(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. JOHNSON, TON, , ,

Mailing Address 1531 Fern Street SW

City
OlympiaState
WAZip Code
98502FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28Occupation (for Individual)
LABOR ADVOCATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	14	/	2018

Transaction ID : SA11AI.207858

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNSON, TOYA, D., ,

Mailing Address 3076 Noelle Court

City
ColumbusState
OHZip Code
43232FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ACCOUNTANT/EXAMINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210276

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNSON, WAYLAND, C., , JR.

Mailing Address 11340 S. Prairie Avenue

City
ChicagoState
ILZip Code
60628FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
ADMIN ASSISTANT I

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

237.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

Transaction ID : SA11AI.208241

Amount of Each Receipt this Period

37.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

66.00

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 626 OF 1411

(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. JOHNSTON, DIANE, K., ,

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 (for Individual)

AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

987.55

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211701

Amount of Each Receipt this Period

135.58

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNWELL, ALICIA, , ,

Mailing Address 1600 Worthington Park Blvd.

City

Westerville

State

OH

Zip Code

43081

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

CUSTOMER SERVICE REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210277

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOLLY, GERARD, P., ,

Mailing Address 2107 Twin Flower Circle

City

Grove City

State

OH

Zip Code

43123

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

FISCAL SPECIALIST I

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1550.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209001

Amount of Each Receipt this Period

65.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

209.08

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 627 OF 1411

(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. JOLLY, GERARD, P., ,

Mailing Address 2107 Twin Flower Circle

City

Grove City

State

OH

Zip Code

43123

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

FISCAL SPECIALIST I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1615.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209632

Amount of Each Receipt this Period

65.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOLLY, GERARD, P., ,

Mailing Address 2107 Twin Flower Circle

City

Grove City

State

OH

Zip Code

43123

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

FISCAL SPECIALIST I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1680.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210278

Amount of Each Receipt this Period

65.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JONES, ANDREW, , ,

Mailing Address 5545 Shamrock Lane

City

Fitchburg

State

WI

Zip Code

53711

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WI CN 32/DANE COUNTY

Occupation (for Individual)

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
10 / 24 / 2018

Transaction ID : SA11AI.211418

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

140.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 628 OF 1411

(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. JONES, ANDREW, , ,

Mailing Address 5545 Shamrock Lane

City
Fitchburg

State
WI

Zip Code
53711

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WI CN 32/DANE COUNTY

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

11 / 01 / 2018

Transaction ID : SA11AI.211419

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JONES, ANDREW, , ,

Mailing Address 5545 Shamrock Lane

City
Fitchburg

State
WI

Zip Code
53711

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WI CN 32/DANE COUNTY

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 16 / 2018

Transaction ID : SA11AI.211440

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JONES, CARLA, L., ,

Mailing Address 1310 Campbell Street

City
Sandusky

State
OH

Zip Code
44870

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
FOOD SERVICE WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

207.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209633

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

29.00

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 629 OF 1411

(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. JONES, CARLA, L., ,

Mailing Address 1310 Campbell Street

City
Sandusky

State
OH

Zip Code
44870

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
FOOD SERVICE WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210279

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JONES, GRACE, E., ,

Mailing Address 2604 Brookview Drive

City
Burnsville

State
MN

Zip Code
55337

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211702

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JONES, JASON, J., ,

Mailing Address 1832 Buchanan Street

City
Sandusky

State
OH

Zip Code
44870

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
LPN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2018

Transaction ID : SA11AI.210632

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

44.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 630 OF 1411

☒ 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. JONES, JASON, J., ,

Mailing Address 1832 Buchanan Street

City
SanduskyState
OHZip Code
44870FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
LPN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	6		2	0	1	8

Transaction ID : SA11AI.209004

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JONES, JASON, J., ,

Mailing Address 1065 E Margate Circle

City
LondonState
OHZip Code
43140FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	9		2	0	1	8

Transaction ID : SA11AI.209634

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JONES, JASON, J., ,

Mailing Address 1832 Buchanan Street

City
SanduskyState
OHZip Code
44870FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
LPN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	9		2	0	1	8

Transaction ID : SA11AI.209635

Amount of Each Receipt this Period

15.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

35.00

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 631 OF 1411

(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. JONES, JASON, J., ,

Mailing Address 1065 E Margate Circle

City
London

State
OH

Zip Code
43140

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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210280

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JONES, JASON, J., ,

Mailing Address 1832 Buchanan Street

City
Sandusky

State
OH

Zip Code
44870

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
LPN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210281

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JONES, KELVIN, J., ,

Mailing Address P.O. Box 593

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)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

530.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209005

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 632 OF 1411
(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. JONES, KELVIN, J., ,

Mailing Address P.O. Box 593

City
ColumbusState
OHZip Code
43216FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	06	2018

Transaction ID : SA11AI.210283

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JONES, KELVIN, J., ,

Mailing Address P.O. Box 593

City
ColumbusState
OHZip Code
43216FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

565.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209636

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JONES, KELVIN, J., ,

Mailing Address P.O. Box 593

City
ColumbusState
OHZip Code
43216FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

580.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210282

Amount of Each Receipt this Period

15.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

50.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 633 OF 1411

(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. JONES, LAWRENCE, , ,

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/NSP/LOCAL 297

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 08 / 2018

Transaction ID : SA11AI.207070

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JONES, PATRICIA, F., ,

Mailing Address 1823 Oak Street

City
North Aurora

State
IL

Zip Code
60542

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
CORRECTIONS OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 05 / 2018

Transaction ID : SA11AI.208242

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JONES, RYAN, D., ,

Mailing Address 13260 Clark Street

City
Weston

State
OH

Zip Code
43569

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
TRAINING OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

308.00

Date of Receipt

10 / 26 / 2018

Transaction ID : SA11AI.209006

Amount of Each Receipt this Period

14.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

55.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 634 OF 1411

(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. JONES, RYAN, D., ,

Mailing Address 13260 Clark Street

City
WestonState
OHZip Code
43569FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
TRAINING OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2018

Transaction ID : SA11AI.209637

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JONES, RYAN, D., ,

Mailing Address 13260 Clark Street

City
WestonState
OHZip Code
43569FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
TRAINING OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 11 / 23 / 2018

Transaction ID : SA11AI.210284

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JONES, SJONAE, , ,

Mailing Address 4855 Seminole Drive

City
San DiegoState
CAZip Code
92115FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 3930Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2018

Transaction ID : SA11AI.211153

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

48.00

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 635 OF 1411

(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. JONES, SOWETA, S., ,

Mailing Address 3853 Western

City
Alton

State
IL

Zip Code
62002

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
SEC THERAPY AIDE I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208243

Amount of Each Receipt this Period

63.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JONES, VANESSA, R., ,

Mailing Address 385 Clark Drive

City
Circleville

State
OH

Zip Code
43113

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
JUVENILE CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210285

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JONES, YANCEY, H., ,

Mailing Address 69 Bayham Drive

City
Cincinnati

State
OH

Zip Code
45218

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
TRAINING OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209639

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

80.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 636 OF 1411

(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. JONES, YANCEY, H., ,

Mailing Address 69 Bayham Drive

City
Cincinnati

State
OH

Zip Code
45218

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
TRAINING OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210286

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JONES-STREET, RENITA, , ,

Mailing Address 853 Glasgow Drive

City
Cincinnati

State
OH

Zip Code
45240

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1339.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210906

Amount of Each Receipt this Period

95.74

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JORDAN, BLANCHIE, M., ,

Mailing Address 5885 Bear Creek Drive

City
Bedford Hts

State
OH

Zip Code
44146

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
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
10 / 26 / 2018

Transaction ID : SA11AI.209009

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

114.74

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 637 OF 1411

(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. JORDAN, BLANCHIE, M., ,

Mailing Address 5885 Bear Creek Drive

City

Bedford Hts

State

OH

Zip Code

44146

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209640

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JORDAN, BLANCHIE, M., ,

Mailing Address 5885 Bear Creek Drive

City

Bedford Hts

State

OH

Zip Code

44146

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210287

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JORDAN, JAMES, E., ,

Mailing Address 21417 Watson Road

City

Maple Heights

State

OH

Zip Code

44137

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

WORKERS COMPENSATION CLAIMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

341.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209010

Amount of Each Receipt this Period

15.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

35.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 638 OF 1411

(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. JORDAN, JAMES, E., ,

Mailing Address 21417 Watson Road

City

Maple Heights

State

OH

Zip Code

44137

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

WORKERS COMPENSATION CLAIMS

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

356.50

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209641

Amount of Each Receipt this Period

15.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JORDAN, JAMES, E., ,

Mailing Address 21417 Watson Road

City

Maple Heights

State

OH

Zip Code

44137

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

WORKERS COMPENSATION CLAIMS

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

372.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210288

Amount of Each Receipt this Period

15.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JORDAN, MATTHEW, E., ,

Mailing Address 6909 Greenway Drive

City

Oklahoma City

State

OK

Zip Code

73132-6226

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

LEAD ORGANIZER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206331

Amount of Each Receipt this Period

55.45

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

86.45

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 639 OF 1411

(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. JORDAN, MATTHEW, E., ,

Mailing Address 6909 Greenway Drive

City
Oklahoma City

State
OK

Zip Code
73132-6226

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
LEAD ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1256.97

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206702

Amount of Each Receipt this Period

56.97

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JORDAN, MELISSA, A., ,

Mailing Address 517 Fulton Street

City
Sandusky

State
OH

Zip Code
44870

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HOSPITAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209011

Amount of Each Receipt this Period

18.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JORDAN, MELISSA, A., ,

Mailing Address 517 Fulton Street

City
Sandusky

State
OH

Zip Code
44870

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HOSPITAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

402.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209642

Amount of Each Receipt this Period

18.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

92.97

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 640 OF 1411
(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. JORDAN, MELISSA, A., ,

Mailing Address 517 Fulton Street

City
SanduskyState
OHZip Code
44870FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
HOSPITAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210289

Amount of Each Receipt this Period

18.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOURNIGAN, ROOSEVELT, , , JR.

Mailing Address 222 Nobes Avenue

City
LockportState
ILZip Code
60441FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208244

Amount of Each Receipt this Period

45.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JULA, MICHAEL, A., ,Mailing Address 1515 Nixon Avenue
P.O. Box 612City
IndianaState
PAZip Code
15701FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/PASSHEOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.207071

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

83.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 641 OF 1411

(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. KABUS, THOMAS, E., , JR

Mailing Address 1273 Schliauter Road

City
TamarackState
MNZip Code
55787FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MNOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	01	2018

Transaction ID : SA11AI.211703

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KAESER, SHERI, L., ,Mailing Address 1722 211th Street East
#30City
SpanawayState
WAZip Code
98387FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	25	2018

Transaction ID : SA11AI.207433

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KAESER, SHERI, L., ,Mailing Address 1722 211th Street East
#30City
SpanawayState
WAZip Code
98387FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.50

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.207634

Amount of Each Receipt this Period

10.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

51.00

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 642 OF 1411

(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. KAESER, SHERI, L., ,

Mailing Address 1722 211th Street East
#30

City
Spanaway

State
WA

Zip Code
98387

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207859

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KAHEIKI, IWALANI, P., ,

Mailing Address 171 Desha Avenue

City
Hilo

State
HI

Zip Code
96720

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 152

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211000

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KAHLE, DANA, H., ,

Mailing Address 713 Piper Road

City
Shippenville

State
PA

Zip Code
16254

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/PASSHE

Occupation (for Individual)
CLERK

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.207072

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 643 OF 1411

(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. KAIPO, CLARENCE, , ,

Mailing Address 103 S. Wiliwili Street

City
HiloState
HIZip Code
96720FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME HI LOC 646

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.51

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.211283

Amount of Each Receipt this Period

19.22

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KAISER, ESTHER, A., ,

Mailing Address 6510 Hokah Drive

City
Lino LakesState
MNZip Code
55014FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211704

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KAISER, KERI, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207635

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

49.22

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 644 OF 1411

(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. KAISER, KERI, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 26 / 2018

Transaction ID : SA11AI.207860

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KALE, DAVID, ., ,

Mailing Address 370 S 5th Street
Apt. 401

City
Columbus

State
OH

Zip Code
43215

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
RESEARCHER III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210290

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KALUA, SHERALYN, , ,

Mailing Address 1426 North School Street

City
Honolulu

State
HI

Zip Code
96817

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 646

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

352.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.211284

Amount of Each Receipt this Period

32.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 645 OF 1411

(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. KAMER, TIMOTHY, LEE, ,

Mailing Address 1529 Jackson Street

City
Portsmouth

State
OH

Zip Code
45662

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/PORTSMOUTH

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.40

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.210907

Amount of Each Receipt this Period

10.42

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KANESHIRO, ARNOLD, K., ,

Mailing Address 1374 Mailani Street

City
Hilo

State
HI

Zip Code
96720

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 152

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211001

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KANNEH, MOHAMMED, B., ,

Mailing Address 3518 Brunswick Avenue N

City
Minneapolis

State
MN

Zip Code
55422

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
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
11 / 01 / 2018

Transaction ID : SA11AI.211705

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.42

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 646 OF 1411

(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. KARLIE, DENISE, L., ,

Mailing Address 908 Rosewood Drive

City
ElyriaState
OHZip Code
44035FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2018

Transaction ID : SA11AI.209013

Amount of Each Receipt this Period

14.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KARLIE, DENISE, L., ,

Mailing Address 908 Rosewood Drive

City
ElyriaState
OHZip Code
44035FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		09		2018

Transaction ID : SA11AI.209644

Amount of Each Receipt this Period

14.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KARLIE, DENISE, L., ,

Mailing Address 908 Rosewood Drive

City
ElyriaState
OHZip Code
44035FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		23		2018

Transaction ID : SA11AI.210291

Amount of Each Receipt this Period

14.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

43.50

TOTAL This Period (last page this line number only).....▶

X	11a		11b		11c		12		
	13		14		15		16		17

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

FEC Schedule A (Form 3X) Rev. 06/2016

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 648 OF 1411

(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. KASHIWAMURA, LORENA, J., ,

Mailing Address P.O.Box 39

City
Wailuku

State
HI

Zip Code
96793

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 646

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.211285

Amount of Each Receipt this Period

22.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KASHUBA, SCOTT, A., ,

Mailing Address 189 E Grover Street

City
Killbuck

State
OH

Zip Code
44637

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ENERGY PROGRAM DEVELOPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209645

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KASHUBA, SCOTT, A., ,

Mailing Address 189 E Grover Street

City
Killbuck

State
OH

Zip Code
44637

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ENERGY PROGRAM DEVELOPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210292

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 649 OF 1411

(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. KASLER, JEFFREY, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.207636

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KASLER, JEFFREY, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	26	2018

Transaction ID : SA11AI.207861

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KATRANCHA, MICHAEL, J., ,Mailing Address 6225 Bent Pine Drive
#422BCity
OrlandoState
FLZip Code
32822FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

254.58

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206332

Amount of Each Receipt this Period

13.02

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

33.02

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 650 OF 1411

(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. KATRANCHA, MICHAEL, J., ,Mailing Address 6225 Bent Pine Drive
#422BCity
OrlandoState
FLZip Code
32822FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.60

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	15	2018

Transaction ID : SA11AI.206703

Amount of Each Receipt this Period

13.02

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KATZENBERG, STUART, , ,Mailing Address 190 W. Ostend Street
Suite 101

City

Baltimore

State
MDZip Code
21230FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MD CN 3Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.32

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	07	2018

Transaction ID : SA11AI.211322

Amount of Each Receipt this Period

60.08

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KAUFFMAN, WILLIAM, , ,

Mailing Address 4031 Executive Park Drive

City

Harrisburg

State
PAZip Code
17111FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

476.48

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	08	2018

Transaction ID : SA11AI.207073

Amount of Each Receipt this Period

44.20

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

117.30

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 651 OF 1411

(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. KAUFMAN, BRITT, D., ,

Mailing Address 1212 Jefferson Street SE
Suite 300

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28

Occupation (for Individual)
COUNCIL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2018

Transaction ID : SA11AI.207862

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KAWAKAMI, RONALD, K., ,

Mailing Address 888 Mililani Street
Suite 601

City
Honolulu

State
HI

Zip Code
96813-2991

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI RET CHPT 152

Occupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211041

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KAY, JASON, , ,

Mailing Address 2000 Cleveland

City
Evanston

State
IL

Zip Code
60202

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31

Occupation (for Individual)
POLITICAL ACTION DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

825.83

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208246

Amount of Each Receipt this Period

82.58

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

142.58

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 652 OF 1411

(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. KEARNEY, ALAN, E., ,

Mailing Address 9254 Highland Creek Road

City

Bloomington

State

MN

Zip Code

55437

FEC ID number of contributing
federal political committee.

Name of Employer (for Individual)

AFSCME MN CN 5/CN14

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.211706

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KEARSE, EARNESTINE, D., ,

Mailing Address 117 N. Harrisburg Street

City

Steelton

State

PA

Zip Code

17113

FEC ID number of contributing
federal political committee.

Name of Employer (for Individual)

AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.207074

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KEARSE, EARNESTINE, D., ,

Mailing Address 117 N. Harrisburg Street

City

Steelton

State

PA

Zip Code

17113

FEC ID number of contributing
federal political committee.

Name of Employer (for Individual)

AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.207075

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 653 OF 1411

(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. KEEGAN, TIFFANY, M., ,

Mailing Address 363 S County Road 278

City
Clyde

State
OH

Zip Code
43410

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HOSPITAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209646

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KEEGAN, TIFFANY, M., ,

Mailing Address 363 S County Road 278

City
Clyde

State
OH

Zip Code
43410

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HOSPITAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210293

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KEEN, GREGORY, J., ,

Mailing Address 13 Glenwood Lane

City
Chatham

State
IL

Zip Code
62629

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
STOREKEEPER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

420.00

Date of Receipt

11 / 05 / 2018

Transaction ID : SA11AI.208247

Amount of Each Receipt this Period

42.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 654 OF 1411

(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. KEENAN, JOHN, H., ,

Mailing Address 3522 11th Street NW

City
Washington

State
DC

Zip Code
20010

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
STRATEGIC ANALYST III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1004.68

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206333

Amount of Each Receipt this Period

51.63

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KEENAN, JOHN, H., ,

Mailing Address 3522 11th Street NW

City
Washington

State
DC

Zip Code
20010

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
STRATEGIC ANALYST III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1056.31

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206704

Amount of Each Receipt this Period

51.63

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KEENEY, STEPHEN, R., ,

Mailing Address 2963 County Line Road
Unit B

City
Kettering

State
OH

Zip Code
45430

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

665.14

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210908

Amount of Each Receipt this Period

60.74

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

164.00

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 655 OF 1411

(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. KELLER, DAVID, E., ,

Mailing Address 266 So. Lime Street

City
Orange

State
CA

Zip Code
92868

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 1902

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 19 / 2018

Transaction ID : SA11AI.211060

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KELLER, DAVID, E., ,

Mailing Address 266 So. Lime Street

City
Orange

State
CA

Zip Code
92868

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 1902

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211081

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KELLER, DAVID, E., ,

Mailing Address 266 So. Lime Street

City
Orange

State
CA

Zip Code
92868

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 1902

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 20 / 2018

Transaction ID : SA11AI.211102

Amount of Each Receipt this Period

12.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

36.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 656 OF 1411
(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. KELLER, JASON, A., ,			Date of Receipt M M / D D / Y Y Y Y Y 10 / 31 / 2018 Transaction ID : SA11AI.206334	
Mailing Address 9010 Saint Andrews Place			Amount of Each Receipt this Period 10.42	
City College Park	State MD	Zip Code 20740	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) AFSCME INT'L		Occupation (for Individual) OFFICE ASSISTANT III		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Aggregate Year-to-Date ▼ 208.40		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. KELLER, JASON, A., ,			Date of Receipt M M / D D / Y Y Y Y Y 11 / 15 / 2018 Transaction ID : SA11AI.206705	
Mailing Address 9010 Saint Andrews Place			Amount of Each Receipt this Period 10.42	
City College Park	State MD	Zip Code 20740	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) AFSCME INT'L		Occupation (for Individual) OFFICE ASSISTANT III		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Aggregate Year-to-Date ▼ 218.82		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. KELLEY, MARYANN, R., ,			Date of Receipt M M / D D / Y Y Y Y Y 10 / 25 / 2018 Transaction ID : SA11AI.207436	
Mailing Address 1212 Jefferson Street SE			Amount of Each Receipt this Period 11.00	
City Olympia	State WA	Zip Code 98501	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA		Occupation (for Individual) STAFF REPRESENTATIVE		
Receipt For: ☐ Primary ☐ General ☐ Other (specify)		Aggregate Year-to-Date ▼ 207.00		
SUBTOTAL of Receipts This Page (optional).....▶			31.84	
TOTAL This Period (last page this line number only).....▶				

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 657 OF 1411

(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. KELLEY, MARYANN, R., ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207637

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KELLEY, MARYANN, R., ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207863

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KELLY, ANDREW, T., ,

Mailing Address 3794 Randee Lane

City
Springfield

State
OH

Zip Code
45502

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 ▼

209.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209016

Amount of Each Receipt this Period

9.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

31.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 658 OF 1411

(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. KELLY, ANDREW, T., ,

Mailing Address 3794 Randee Lane

City
Springfield

State
OH

Zip Code
45502

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 ▼

218.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209647

Amount of Each Receipt this Period

9.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KELLY, ANDREW, T., ,

Mailing Address 3794 Randee Lane

City
Springfield

State
OH

Zip Code
45502

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 ▼

228.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210294

Amount of Each Receipt this Period

9.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KELLY, CHERYL, A., ,

Mailing Address 13557 Dodsworth Drive

City
Bristow

State
VA

Zip Code
20136

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ASSISTANT DIRECTOR, CTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1779.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206335

Amount of Each Receipt this Period

86.73

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.73

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 659 OF 1411

(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. KELLY, CHERYL, A., ,

Mailing Address 13557 Dodsworth Drive

City
BristowState
VAZip Code
20136FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ASSISTANT DIRECTOR, CTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1866.33

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		1	5			2	0	1	8		

Transaction ID : SA11AI.206706

Amount of Each Receipt this Period

86.73

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KELLY, KATHERINE, , ,

Mailing Address 300 South 6th Street

City

Minneapolis

State

MN

Zip Code

55487

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MN CN 5/HENNEPIN COUNTY

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	1			2	0	1	8		

Transaction ID : SA11AI.211707

Amount of Each Receipt this Period

45.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KELLY, TONJA, E., ,

Mailing Address 53 Chaplen Drive

City

Dayton

State

OH

Zip Code

45426

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 ▼

220.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	8		

Transaction ID : SA11AI.209017

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

141.73

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 660 OF 1411

(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. KELLY, TONJA, E., ,

Mailing Address 53 Chaplen Drive

City
Dayton

State
OH

Zip Code
45426

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 ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209648

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KELLY, TONJA, E., ,

Mailing Address 53 Chaplen Drive

City
Dayton

State
OH

Zip Code
45426

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 ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210295

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KEMPF, JAMES, M., ,

Mailing Address 3442 Richard Avenue

City
Grove City

State
OH

Zip Code
43123

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 ▼

209.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209018

Amount of Each Receipt this Period

9.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

29.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 661 OF 1411

(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. KEMPF, JAMES, M., ,

Mailing Address 3442 Richard Avenue

City

Grove City

State

OH

Zip Code

43123

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 ▼

218.50

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	9			2	0	1	8		

Transaction ID : SA11AI.209649

Amount of Each Receipt this Period

9.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KEMPF, JAMES, M., ,

Mailing Address 3442 Richard Avenue

City

Grove City

State

OH

Zip Code

43123

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 ▼

228.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	3			2	0	1	8		

Transaction ID : SA11AI.210296

Amount of Each Receipt this Period

9.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KEMRER, MARGARET, A., ,Mailing Address 1125 12th Avenue SE
Apt. A105

City

Olympia

State

WA

Zip Code

98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	9			2	0	1	8		

Transaction ID : SA11AI.207638

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

29.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 662 OF 1411

(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. KEMRER, MARGARET, A., ,Mailing Address 1125 12th Avenue SE
Apt. A105City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
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
11			26			2018			

Transaction ID : SA11AI.207864

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KENNEBREW, FALISHA, D., ,

Mailing Address 117 W Prospect Street

City

Mansfield

State
OHZip Code
44907FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2018			

Transaction ID : SA11AI.209019

Amount of Each Receipt this Period

17.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KENNEBREW, FALISHA, D., ,

Mailing Address 117 W Prospect Street

City

Mansfield

State
OHZip Code
44907FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

391.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			09			2018			

Transaction ID : SA11AI.209650

Amount of Each Receipt this Period

17.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

44.00

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KENNEBREW, FALISHA, D., ,

Mailing Address 117 W Prospect Street

City
Mansfield

State
OH

Zip Code
44907

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 ▼

408.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210298

Amount of Each Receipt this Period

17.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KERVIN, KAREN, E., ,

Mailing Address 318 Hane Avenue

City
Marion

State
OH

Zip Code
43302

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 ▼

242.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209020

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KERVIN, KAREN, E., ,

Mailing Address 318 Hane Avenue

City
Marion

State
OH

Zip Code
43302

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 ▼

253.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209651

Amount of Each Receipt this Period

11.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

39.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 664 OF 1411

(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. KERVIN, KAREN, E., ,

Mailing Address 318 Hane Avenue

City
Marion

State
OH

Zip Code
43302

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 ▼

264.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210299

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KESSLER, CHARLES, , ,

Mailing Address 24 Key Drive

City
Norwalk

State
OH

Zip Code
44857

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
CARPENTER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209652

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KESSLER, CHARLES, , ,

Mailing Address 24 Key Drive

City
Norwalk

State
OH

Zip Code
44857

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
CARPENTER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210300

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

29.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 665 OF 1411

(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. KESSLER, DEAN, R., ,

Mailing Address 440 Yarmouth Lane

 City
 Columbus

 State
 OH

 Zip Code
 43228

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 FACILITY MAINTENANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.209653

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KESSLER, DEAN, R., ,

Mailing Address 440 Yarmouth Lane

 City
 Columbus

 State
 OH

 Zip Code
 43228

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 FACILITY MAINTENANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.210301

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KICKEN, JOANNE, , ,

Mailing Address 271 W. Mason Avenue

 City
 Buckley

 State
 WA

 Zip Code
 98321

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.207438

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 666 OF 1411

(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. KICKEN, JOANNE, , ,

Mailing Address 271 W. Mason Avenue

City
Buckley

State
WA

Zip Code
98321

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

735.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207639

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KICKEN, JOANNE, , ,

Mailing Address 271 W. Mason Avenue

City
Buckley

State
WA

Zip Code
98321

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

770.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207865

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KIDNEY, DEBRA, , ,

Mailing Address 6420 N. Willamette Blvd.

City
Portland

State
OR

Zip Code
97203

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
FIELD EDUCATION COORDINATOR II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1529.05

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206336

Amount of Each Receipt this Period

73.53

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

143.53

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 667 OF 1411

(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. KIDNEY, DEBRA, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 6420 N. Willamette Blvd. City Portland State OR Zip Code 97203 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME INT'L Occupation (for Individual) FIELD EDUCATION COORDINATOR II Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 1602.58			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 15 / 2018 Transaction ID : SA11AI.206707 Amount of Each Receipt this Period 73.53 ☐ Memo Item
B. KINDER, ANGEL, L., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 823 Pinehurst Street City Marysville State OH Zip Code 43040 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 ▼ 220.00			Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 26 / 2018 Transaction ID : SA11AI.209023 Amount of Each Receipt this Period 10.00 ☐ Memo Item
C. KINDER, ANGEL, L., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 823 Pinehurst Street City Marysville State OH Zip Code 43040 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 ▼ 230.00			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 09 / 2018 Transaction ID : SA11AI.209654 Amount of Each Receipt this Period 10.00 ☐ Memo Item
SUBTOTAL of Receipts This Page (optional)..... ▶			93.53
TOTAL This Period (last page this line number only)..... ▶			

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 668 OF 1411

(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. KINDER, ANGEL, L., ,

Mailing Address 823 Pinehurst Street

City
MarysvilleState
OHZip Code
43040FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	3			2	0	1	8		

Transaction ID : SA11AI.210302

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KING, CHARLES, H., ,

Mailing Address 2123 W. Gardenia Drive

City
PataskalaState
OHZip Code
43062FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
EEO CONTRACTOR/PROGRAMMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	8		

Transaction ID : SA11AI.209024

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KING, CHARLES, H., ,

Mailing Address 2123 W. Gardenia Drive

City
PataskalaState
OHZip Code
43062FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
EEO CONTRACTOR/PROGRAMMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

322.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	9			2	0	1	8		

Transaction ID : SA11AI.209655

Amount of Each Receipt this Period

14.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

38.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 669 OF 1411
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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. KING, CHARLES, H., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name			Date of Receipt M M / D D / Y Y Y Y Y 11 / 23 / 2018 Transaction ID : SA11AI.210303	
Mailing Address 2123 W. Gardenia Drive			Amount of Each Receipt this Period 14.00	
City Pataskala	State OH	Zip Code 43062	☐ Memo Item	
FEC ID number of contributing federal political committee. C 			Aggregate Year-to-Date ▼ 336.00	
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH			Occupation (for Individual) EEO CONTRACTOR/PROGRAMMER	
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼				

B. KING, MONA, L., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name			Date of Receipt M M / D D / Y Y Y Y Y 10 / 31 / 2018 Transaction ID : SA11AI.206337	
Mailing Address 929 Rye Drive			Amount of Each Receipt this Period 37.65	
City La Plata	State MD	Zip Code 20646	☐ Memo Item	
FEC ID number of contributing federal political committee. C 			Aggregate Year-to-Date ▼ 756.56	
Name of Employer (for Individual) AFSCME INT'L			Occupation (for Individual) RECORDS OFFICE ASSISTANT	
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼				

C. KING, MONA, L., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name			Date of Receipt M M / D D / Y Y Y Y Y 11 / 15 / 2018 Transaction ID : SA11AI.206708	
Mailing Address 929 Rye Drive			Amount of Each Receipt this Period 37.65	
City La Plata	State MD	Zip Code 20646	☐ Memo Item	
FEC ID number of contributing federal political committee. C 			Aggregate Year-to-Date ▼ 794.21	
Name of Employer (for Individual) AFSCME INT'L			Occupation (for Individual) RECORDS OFFICE ASSISTANT	
Receipt For: ☐ Primary ☐ General ☐ Other (specify)				

SUBTOTAL of Receipts This Page (optional).....	 89.30
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 670 OF 1411

(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. KING, SPENCER, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 1212 Jefferson Street SE City Olympia State WA Zip Code 98501 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA Occupation (for Individual) 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 Y 10 / 25 / 2018 Transaction ID : SA11AI.207439 Amount of Each Receipt this Period 15.00 ☐ Memo Item
B. KING, SPENCER, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 1212 Jefferson Street SE City Olympia State WA Zip Code 98501 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 315.00			Date of Receipt M M / D D / Y Y Y Y Y 11 / 09 / 2018 Transaction ID : SA11AI.207640 Amount of Each Receipt this Period 15.00 ☐ Memo Item
C. KING, SPENCER, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 1212 Jefferson Street SE City Olympia State WA Zip Code 98501 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 330.00			Date of Receipt M M / D D / Y Y Y Y Y 11 / 26 / 2018 Transaction ID : SA11AI.207866 Amount of Each Receipt this Period 15.00 ☐ Memo Item
SUBTOTAL of Receipts This Page (optional)..... ▶			45.00
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 671 OF 1411

(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. KIRSCHER, SHARON, A., ,

Mailing Address 8406 Red Oak Drive

City
Mounds View

State
MN

Zip Code
55112

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
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
11 / 01 / 2018

Transaction ID : SA11AI.211708

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KISER, ROBIN, Y., ,

Mailing Address 4778 Mcallister Avenue

City
Columbus

State
OH

Zip Code
43227

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
WORKERS COMPENSATION CLAIMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.50

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209025

Amount of Each Receipt this Period

10.75

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KISER, ROBIN, Y., ,

Mailing Address 4778 Mcallister Avenue

City
Columbus

State
OH

Zip Code
43227

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
WORKERS COMPENSATION CLAIMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

247.25

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209656

Amount of Each Receipt this Period

10.75

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

41.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 672 OF 1411

(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. KISER, ROBIN, Y., ,

Mailing Address 4778 Mcallister Avenue

 City
 Columbus

 State
 OH

 Zip Code
 43227

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 WORKERS COMPENSATION CLAIMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.210304

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KISSIAR, CHERIE, M., ,

Mailing Address 2783 Hillcrest Drive

 City
 Lexington

 State
 OH

 Zip Code
 44904

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 LICENSED PRACTICAL NURSE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.209657

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KISSIAR, CHERIE, M., ,

Mailing Address 2783 Hillcrest Drive

 City
 Lexington

 State
 OH

 Zip Code
 44904

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 LICENSED PRACTICAL NURSE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.210305

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 673 OF 1411

(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. KITCHENS, AMY, S., ,

Mailing Address 4855 Seminole Drive

City
San DiegoState
CAZip Code
92115FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 3930Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				07				2018					

Transaction ID : SA11AI.211154

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KITTS, RICHARD, D., ,

Mailing Address 1500 Marion Road

City
BucyrusState
OHZip Code
44820FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
HIGHWAY TECHNICIAN I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

561.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				26				2018					

Transaction ID : SA11AI.209027

Amount of Each Receipt this Period

25.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KITTS, RICHARD, D., ,

Mailing Address 1500 Marion Road

City
BucyrusState
OHZip Code
44820FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
HIGHWAY TECHNICIAN I

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

586.50

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				09				2018					

Transaction ID : SA11AI.209658

Amount of Each Receipt this Period

25.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

71.00

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 674 OF 1411

(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. KITTS, RICHARD, D., ,

Mailing Address 1500 Marion Road

City

Bucyrus

State

OH

Zip Code

44820

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

HIGHWAY TECHNICIAN I

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

612.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210306

Amount of Each Receipt this Period

25.50

☐

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KIZINA, MARGARET, M., ,

Mailing Address 45 Linden Lane

City

Boyetown

State

PA

Zip Code

19512

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.207076

Amount of Each Receipt this Period

40.00

☐

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KLEIN, KENDRA, L., ,

Mailing Address 1760 295th Street

City

Salem

State

IA

Zip Code

52649

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐
☐

Primary

☐

General

Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2018

Transaction ID : SA11AI.211844

Amount of Each Receipt this Period

10.00

☐

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

75.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 675 OF 1411

(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. KLEIN, KENDRA, L, ,

Mailing Address 1760 295th Street

City
Salem

State
IA

Zip Code
52649

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)
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
10 / 26 / 2018

Transaction ID : SA11AI.211910

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KLINE, CHRISTOPHER, A., ,

Mailing Address 96 West Street

City
McClure

State
PA

Zip Code
17841

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)
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
10 / 31 / 2018

Transaction ID : SA11AI.207077

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KLINGER, BARBARA, A, ,

Mailing Address 425 Kriesel Place NE

City
Owatonna

State
MN

Zip Code
55060

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
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
11 / 01 / 2018

Transaction ID : SA11AI.211709

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 676 OF 1411

(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. KLOPP, BRIAN, W., , Mailing Address 4707 Calvert Road City College Park State MD Zip Code 20740 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME INT'L Occupation (for Individual) LABOR ECONOMIST III Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 1054.64			Date of Receipt 10 / 31 / 2018 Transaction ID : SA11AI.206338 Amount of Each Receipt this Period 53.05 ☐ Memo Item		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. KLOPP, BRIAN, W., , Mailing Address 4707 Calvert Road City College Park State MD Zip Code 20740 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME INT'L Occupation (for Individual) LABOR ECONOMIST III Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 1107.69			Date of Receipt 11 / 15 / 2018 Transaction ID : SA11AI.206709 Amount of Each Receipt this Period 53.05 ☐ Memo Item		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. KLUMKER, AUBREY, , , Mailing Address 1212 Jefferson Street SE City Olympia State WA Zip Code 98501 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) Aggregate Year-to-Date ▼ 210.00			Date of Receipt 11 / 26 / 2018 Transaction ID : SA11AI.207867 Amount of Each Receipt this Period 15.00 ☐ Memo Item		
SUBTOTAL of Receipts This Page (optional)..... ▶			121.10		
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 677 OF 1411

(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. KNIPP, MARK, A., ,

Mailing Address 3010 Rock Road

City
Shelby

State
OH

Zip Code
44875

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209028

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KNIPP, MARK, A., ,

Mailing Address 3010 Rock Road

City
Shelby

State
OH

Zip Code
44875

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 ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209659

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KNIPP, MARK, A., ,

Mailing Address 3010 Rock Road

City
Shelby

State
OH

Zip Code
44875

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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210307

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 678 OF 1411

(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. KNIPP, WILLIAM, J., ,

Mailing Address 1235 Olivesburg Road

City
Mansfield

State
OH

Zip Code
44905

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 ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209029

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KNIPP, WILLIAM, J., ,

Mailing Address 1235 Olivesburg Road

City
Mansfield

State
OH

Zip Code
44905

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 ▼

241.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209660

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KNIPP, WILLIAM, J., ,

Mailing Address 1235 Olivesburg Road

City
Mansfield

State
OH

Zip Code
44905

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 ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210308

Amount of Each Receipt this Period

10.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

31.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 679 OF 1411

(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. KNOX, MARCIA, R., ,

Mailing Address 1660 Newton Avenue

City
DaytonState
OHZip Code
45406FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8Occupation (for Individual)
REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1276.46

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	06	2018

Transaction ID : SA11AI.210856

Amount of Each Receipt this Period

108.34

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KNOX, MARCIA, R., ,

Mailing Address 1660 Newton Avenue

City
DaytonState
OHZip Code
45406FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8Occupation (for Individual)
REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1281.46

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	15	2018

Transaction ID : SA11AI.210909

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KNUTSON, ERIC, S., ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.207642

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

123.34

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 680 OF 1411

(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. KNUTSON, ERIC, S., ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 26 / 2018

Transaction ID : SA11AI.207868

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KOHLER, CARLY, K., ,

Mailing Address 80 Swan Way
Suite 110

City
Oakland

State
CA

Zip Code
94621

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA CN 57

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.40

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211235

Amount of Each Receipt this Period

16.70

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KOLAND, MARIA, A., ,

Mailing Address P.O. Box 117

City
Motley

State
MN

Zip Code
56466

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
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
11 / 01 / 2018

Transaction ID : SA11AI.211710

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

46.70

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 681 OF 1411

(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. KOPIN, CHERYL, A., ,

Mailing Address 6800 N High Street

City
Worthington

State
OH

Zip Code
43085

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/METROHEALTH

Occupation (for Individual)
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
10 / 23 / 2018

Transaction ID : SA11AI.210815

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KOPIN, CHERYL, A., ,

Mailing Address 6800 N High Street

City
Worthington

State
OH

Zip Code
43085

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/METROHEALTH

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210910

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KORBA, DOUGLAS, M., ,

Mailing Address P.O. Box 172

City
Bannock

State
OH

Zip Code
43972

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 ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209030

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 682 OF 1411

(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. KORBA, DOUGLAS, M., ,

Mailing Address P.O. Box 172

City
Bannock

State
OH

Zip Code
43972

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 ▼

460.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209661

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KORBA, DOUGLAS, M., ,

Mailing Address P.O. Box 172

City
Bannock

State
OH

Zip Code
43972

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 ▼

480.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210309

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KORPI, KERRY, , ,

Mailing Address 8913 First Avenue

City
Silver Spring

State
MD

Zip Code
20910

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L/STATE STREET

Occupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1152.03

Date of Receipt

11 / 02 / 2018

Transaction ID : SA11AI.206711

Amount of Each Receipt this Period

105.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

145.33

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 683 OF 1411

(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. KOSER, RICHARD, A., ,

Mailing Address 576 Dyas Drive

City
MansfieldState
OHZip Code
44905FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
WORKERS COMPENSATION CLAIMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.209031

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KOSER, RICHARD, A., ,

Mailing Address 576 Dyas Drive

City
MansfieldState
OHZip Code
44905FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
WORKERS COMPENSATION CLAIMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209662

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KOSER, RICHARD, A., ,

Mailing Address 576 Dyas Drive

City
MansfieldState
OHZip Code
44905FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
WORKERS COMPENSATION CLAIMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210310

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

75.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 684 OF 1411

(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. KOSTRINSKY, MATHEW, , ,

Mailing Address 4855 Seminole Drive

City
San DiegoState
CAZip Code
92115FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 3930Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	07	2018

Transaction ID : SA11AI.211155

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KOWALIK, STEVEN, J, ,

Mailing Address 5431 Larchwood Lane

City
ToledoState
OHZip Code
43614FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1032.50

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	06	2018

Transaction ID : SA11AI.210911

Amount of Each Receipt this Period

94.24

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KOYAMA, ADELE, N., ,

Mailing Address 1374 Mailani Street

City
HiloState
HIZip Code
96720FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 152Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

229.35

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	01	2018

Transaction ID : SA11AI.211002

Amount of Each Receipt this Period

20.85

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

140.09

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 685 OF 1411

(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. KOZLOSKY, ANDREW, , ,

Mailing Address 55 West Savory Street

City
Pottsville

State
PA

Zip Code
17901

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 ▼

538.34

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207079

Amount of Each Receipt this Period

48.94

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KRAEMER, ALICA, , ,

Mailing Address 19395 Knowlton Parkway
Apt. 202

City
Strongsville

State
OH

Zip Code
44149

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

638.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209032

Amount of Each Receipt this Period

29.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KRAEMER, ALICA, , ,

Mailing Address 19395 Knowlton Parkway
Apt. 202

City
Strongsville

State
OH

Zip Code
44149

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

667.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209663

Amount of Each Receipt this Period

29.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

106.94

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 686 OF 1411

(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. KRAEMER, ALICA, , ,

Mailing Address 19395 Knowlton Parkway
Apt. 202

City State Zip Code
Strongsville OH 44149

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

696.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210311

Amount of Each Receipt this Period

29.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KREISBERG, BEVERLY, , ,

Mailing Address 9954 Whitewater Drive

City State Zip Code
Burke VA 22015

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L/STATE STREET

Occupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

707.29

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 02 / 2018

Transaction ID : SA11AI.206712

Amount of Each Receipt this Period

64.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KREISBERG, STEVEN, , ,

Mailing Address 9954 Whitewater Drive

City State Zip Code
Burke VA 22015

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
DIRECTOR, RESEARCH

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1652.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206340

Amount of Each Receipt this Period

80.35

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

174.02

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 687 OF 1411

(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. KREISBERG, STEVEN, , ,

Mailing Address 9954 Whitewater Drive

City
BurkeState
VAZip Code
22015FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
DIRECTOR, RESEARCH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1732.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2018

Transaction ID : SA11AI.206713

Amount of Each Receipt this Period

80.35

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KREISMAN, DAVID, E., ,

Mailing Address 1140 N Winchester

City
ChicagoState
ILZip Code
60622FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
COMMUNICATIONS ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

686.57

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2018

Transaction ID : SA11AI.206341

Amount of Each Receipt this Period

32.73

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KREISMAN, DAVID, E., ,

Mailing Address 1140 N Winchester

City
ChicagoState
ILZip Code
60622FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
COMMUNICATIONS ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

719.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2018

Transaction ID : SA11AI.206714

Amount of Each Receipt this Period

32.73

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

145.81

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 688 OF 1411

(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. KREKLOW, CRYSTAL, R., ,

Mailing Address 10639 National Street NE

City
Circle PinesState
MNZip Code
55014FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MNOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

565.69

Date of Receipt

M M	D D	Y Y Y Y
11	01	2018

Transaction ID : SA11AI.211711

Amount of Each Receipt this Period

72.62

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KRESGE, TINA, , ,

Mailing Address 4031 Executive Park Drive

City
HarrisburgState
PAZip Code
17111FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.43

Date of Receipt

M M	D D	Y Y Y Y
11	08	2018

Transaction ID : SA11AI.207080

Amount of Each Receipt this Period

8.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KRUEGER, GEORGE, E., ,Mailing Address 834 Allen Avenue
Apt. 4City
Saint PaulState
MNZip Code
55118FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MNOccupation (for Individual)
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
11	01	2018

Transaction ID : SA11AI.211712

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

100.62

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 689 OF 1411

(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. KRUM, JEAN, A., ,

Mailing Address 365 N Cassady Avenue

City
Bexley

State
OH

Zip Code
43209

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
BWC ATTORNEY II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209033

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KRUM, JEAN, A., ,

Mailing Address 365 N Cassady Avenue

City
Bexley

State
OH

Zip Code
43209

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
BWC ATTORNEY II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209664

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KRUM, JEAN, A., ,

Mailing Address 365 N Cassady Avenue

City
Bexley

State
OH

Zip Code
43209

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
BWC ATTORNEY II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210312

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 690 OF 1411

(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. KRUSE, JEREMY, S, ,

Mailing Address 1410 SE Belmont Street
Apt. 208

City
Portland

State
OR

Zip Code
97214

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

622.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206342

Amount of Each Receipt this Period

36.71

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KRUSE, JEREMY, S, ,

Mailing Address 1410 SE Belmont Street
Apt. 208

City
Portland

State
OR

Zip Code
97214

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

659.23

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206715

Amount of Each Receipt this Period

36.71

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KUBINSKI, EVA, , ,

Mailing Address 8033 Excelsior Drive

City
Madison

State
WI

Zip Code
53717-2900

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WI CN 32/STATE OF WI

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

236.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 14 / 2018

Transaction ID : SA11AI.211441

Amount of Each Receipt this Period

19.72

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

93.14

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 691 OF 1411

(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. KUBO, CAROLEE C, , ,

Mailing Address 1919 Young Street

City
Honolulu

State
HI

Zip Code
96826

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 152

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211003

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KULLMAN, STEVEN, F., ,

Mailing Address 310 Timber Run Road

City
Zanesville

State
OH

Zip Code
43701

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ENVIRONMENTAL SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

649.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209034

Amount of Each Receipt this Period

29.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KULLMAN, STEVEN, F., ,

Mailing Address 310 Timber Run Road

City
Zanesville

State
OH

Zip Code
43701

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ENVIRONMENTAL SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

678.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209665

Amount of Each Receipt this Period

29.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

84.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 692 OF 1411

(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. KULLMAN, STEVEN, F., ,

Mailing Address 310 Timber Run Road

City
Zanesville

State
OH

Zip Code
43701

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ENVIRONMENTAL SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

708.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210313

Amount of Each Receipt this Period

29.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KUNZE, LEANNE, P., ,

Mailing Address 123 4th Avenue W
#301

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28

Occupation (for Individual)
DEPUTY EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1016.38

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2018

Transaction ID : SA11AI.207869

Amount of Each Receipt this Period

107.70

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KURZROCK, CRAIG, J., ,

Mailing Address 621 S Ottawa Avenue

City
Dixon

State
IL

Zip Code
61021

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
MENTAL HEALTH TECH I

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208248

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

177.20

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 693 OF 1411

(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. KUSCHEL, JUDY, K., ,

Mailing Address 118 NE 147th Street

City

Vancouver

State

WA

Zip Code

98685

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	25	2018

Transaction ID : SA11AI.207442

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KUSCHEL, JUDY, K., ,

Mailing Address 118 NE 147th Street

City

Vancouver

State

WA

Zip Code

98685

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.207643

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KUSCHEL, JUDY, K., ,

Mailing Address 118 NE 147th Street

City

Vancouver

State

WA

Zip Code

98685

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	26	2018

Transaction ID : SA11AI.207870

Amount of Each Receipt this Period

15.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

45.00

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 694 OF 1411

(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. KUSKY, ERIC, S., , Mailing Address 67 Regent Street <table style="width: 100%;"> <tr> <td style="width: 33%;">City Campbell</td> <td style="width: 16%;">State OH</td> <td style="width: 51%;">Zip Code 44405</td> </tr> </table> FEC ID number of contributing federal political committee. C <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH</td> <td style="width: 67%;">Occupation (for Individual) ADMIN PROFESSIONAL</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00			City Campbell	State OH	Zip Code 44405	Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) ADMIN PROFESSIONAL	Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 26 / 2018 Transaction ID : SA11AI.209035 Amount of Each Receipt this Period 10.00 ☐ Memo Item	
City Campbell	State OH	Zip Code 44405							
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) ADMIN PROFESSIONAL								
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. KUSKY, ERIC, S., , Mailing Address 67 Regent Street <table style="width: 100%;"> <tr> <td style="width: 33%;">City Campbell</td> <td style="width: 16%;">State OH</td> <td style="width: 51%;">Zip Code 44405</td> </tr> </table> FEC ID number of contributing federal political committee. C <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH</td> <td style="width: 67%;">Occupation (for Individual) ADMIN PROFESSIONAL</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 230.00			City Campbell	State OH	Zip Code 44405	Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) ADMIN PROFESSIONAL	Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 09 / 2018 Transaction ID : SA11AI.209666 Amount of Each Receipt this Period 10.00 ☐ Memo Item	
City Campbell	State OH	Zip Code 44405							
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) ADMIN PROFESSIONAL								
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. KUSKY, ERIC, S., , Mailing Address 67 Regent Street <table style="width: 100%;"> <tr> <td style="width: 33%;">City Campbell</td> <td style="width: 16%;">State OH</td> <td style="width: 51%;">Zip Code 44405</td> </tr> </table> FEC ID number of contributing federal political committee. C <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH</td> <td style="width: 67%;">Occupation (for Individual) ADMIN PROFESSIONAL</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00			City Campbell	State OH	Zip Code 44405	Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) ADMIN PROFESSIONAL	Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 23 / 2018 Transaction ID : SA11AI.210314 Amount of Each Receipt this Period 10.00 ☐ Memo Item	
City Campbell	State OH	Zip Code 44405							
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) ADMIN PROFESSIONAL								
SUBTOTAL of Receipts This Page (optional)..... ▶			30.00						
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 695 OF 1411

(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. KWIECINSKI, DANIEL, A., , Mailing Address 5117 Crain Street <table style="width: 100%;"> <tr> <td style="width: 33%;">City Skokie</td> <td style="width: 16%;">State IL</td> <td style="width: 51%;">Zip Code 60077</td> </tr> </table> FEC ID number of contributing federal political committee. C <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer (for Individual) AFSCME IL CN 31/STATE OF IL</td> <td style="width: 67%;">Occupation (for Individual) STAFF REPRESENTATIVE</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 692.28			City Skokie	State IL	Zip Code 60077	Name of Employer (for Individual) AFSCME IL CN 31/STATE OF IL	Occupation (for Individual) STAFF REPRESENTATIVE	Date of Receipt M M / D D / Y Y Y Y Y Y 11 05 2018 Transaction ID : SA11AI.208249 Amount of Each Receipt this Period 76.92 ☐ Memo Item
City Skokie	State IL	Zip Code 60077						
Name of Employer (for Individual) AFSCME IL CN 31/STATE OF IL	Occupation (for Individual) STAFF REPRESENTATIVE							
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. LACNY, JOHN, P., , Mailing Address 3121 S. Yonkers Street <table style="width: 100%;"> <tr> <td style="width: 33%;">City Bloomington</td> <td style="width: 16%;">State IN</td> <td style="width: 51%;">Zip Code 47403</td> </tr> </table> FEC ID number of contributing federal political committee. C <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer (for Individual) AFSCME INT'L</td> <td style="width: 67%;">Occupation (for Individual) REGIONAL FIELD ORGANIZER</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 729.33			City Bloomington	State IN	Zip Code 47403	Name of Employer (for Individual) AFSCME INT'L	Occupation (for Individual) REGIONAL FIELD ORGANIZER	Date of Receipt M M / D D / Y Y Y Y Y Y 10 31 2018 Transaction ID : SA11AI.206343 Amount of Each Receipt this Period 38.35 ☐ Memo Item
City Bloomington	State IN	Zip Code 47403						
Name of Employer (for Individual) AFSCME INT'L	Occupation (for Individual) REGIONAL FIELD ORGANIZER							
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. LACNY, JOHN, P., , Mailing Address 3121 S. Yonkers Street <table style="width: 100%;"> <tr> <td style="width: 33%;">City Bloomington</td> <td style="width: 16%;">State IN</td> <td style="width: 51%;">Zip Code 47403</td> </tr> </table> FEC ID number of contributing federal political committee. C <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer (for Individual) AFSCME INT'L</td> <td style="width: 67%;">Occupation (for Individual) REGIONAL FIELD ORGANIZER</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) Aggregate Year-to-Date ▼ 767.68			City Bloomington	State IN	Zip Code 47403	Name of Employer (for Individual) AFSCME INT'L	Occupation (for Individual) REGIONAL FIELD ORGANIZER	Date of Receipt M M / D D / Y Y Y Y Y Y 11 15 2018 Transaction ID : SA11AI.206716 Amount of Each Receipt this Period 38.35 ☐ Memo Item
City Bloomington	State IN	Zip Code 47403						
Name of Employer (for Individual) AFSCME INT'L	Occupation (for Individual) REGIONAL FIELD ORGANIZER							
SUBTOTAL of Receipts This Page (optional)..... ▶			153.62					
TOTAL This Period (last page this line number only)..... ▶								

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 696 OF 1411

(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. LAGERQUIST, WENDY, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 09 / 2018

Transaction ID : SA11AI.207644

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LAGERQUIST, WENDY, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 26 / 2018

Transaction ID : SA11AI.207871

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LAHR, ANITA, J., ,

Mailing Address 427 Knight Town Road

City
Shippenville

State
PA

Zip Code
16254

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/PASSHE

Occupation (for Individual)
SECRETARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.207081

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 697 OF 1411

(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. LAMANNA, ANGELA, , ,

Mailing Address 296 Churchmans Road

City
New Castle

State
DE

Zip Code
19720

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME DE CN 81

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.32

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 19 / 2018

Transaction ID : SA11AI.211263

Amount of Each Receipt this Period

70.52

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LAMANNA, ANGELA, , ,

Mailing Address 296 Churchmans Road

City
New Castle

State
DE

Zip Code
19720

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME DE CN 81

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.84

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2018

Transaction ID : SA11AI.211270

Amount of Each Receipt this Period

70.52

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LAMBERT, GEORGE, B., ,

Mailing Address 131 Highland Avenue

City
Coatesville

State
PA

Zip Code
19320

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.207082

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

181.04

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 698 OF 1411

(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. LANDAVERDE, HUGO, , ,

Mailing Address 15857 15th Avenue NE

City
Shoreline

State
WA

Zip Code
98155

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/COMM COLLEGE

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 25 / 2018

Transaction ID : SA11AI.207444

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LANDAVERDE, HUGO, , ,

Mailing Address 15857 15th Avenue NE

City
Shoreline

State
WA

Zip Code
98155

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/COMM COLLEGE

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207645

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LANDAVERDE, HUGO, , ,

Mailing Address 15857 15th Avenue NE

City
Shoreline

State
WA

Zip Code
98155

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/COMM COLLEGE

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207872

Amount of Each Receipt this Period

10.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

31.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 699 OF 1411

(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. LANDRIO, STEPHANIE, M., ,

Mailing Address 29 Culvert Street
Apt. C11

City
Port Jervis

State
NY

Zip Code
12771

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/NSP/LOCAL 1841

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207083

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LANE, KATHY, F., ,

Mailing Address 1302 Institute Blvd.

City
Dixon

State
IL

Zip Code
61021

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 ADMIN CAR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.83

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208250

Amount of Each Receipt this Period

38.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LANE, PAUL, R., ,

Mailing Address 119 Eastpointe Ridge Drive
Apt. 215

City
Columbus

State
OH

Zip Code
43213

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209036

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

68.46

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 700 OF 1411

(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. LANE, PAUL, R., , Mailing Address 119 Eastpointe Ridge Drive Apt. 215 City Columbus State OH Zip Code 43213 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 ▼ 230.00			Date of Receipt 11 / 09 / 2018 Transaction ID : SA11AI.209667 Amount of Each Receipt this Period 10.00 ☐ Memo Item	
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. LANE, PAUL, R., , Mailing Address 119 Eastpointe Ridge Drive Apt. 215 City Columbus State OH Zip Code 43213 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 ▼ 240.00			Date of Receipt 11 / 23 / 2018 Transaction ID : SA11AI.210315 Amount of Each Receipt this Period 10.00 ☐ Memo Item	
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. LANEY, KENNETH, A., , Mailing Address 3624 Rt. 553 Highway City Penn Run State PA Zip Code 15765 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME PA CN 13/STATE OF PA Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) Aggregate Year-to-Date ▼ 220.00			Date of Receipt 10 / 31 / 2018 Transaction ID : SA11AI.207084 Amount of Each Receipt this Period 20.00 ☐ Memo Item	
SUBTOTAL of Receipts This Page (optional)..... ▶			40.00	
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 701 OF 1411

(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. LANG, CINDY, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.207646

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LANG, CINDY, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 26 / 2018

Transaction ID : SA11AI.207873

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LANGE, MATTHEW, , ,

Mailing Address 832 N Greenview Avenue

City
Chicago

State
IL

Zip Code
60642

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

677.72

Date of Receipt

11 / 05 / 2018

Transaction ID : SA11AI.208251

Amount of Each Receipt this Period

69.46

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

89.46

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 702 OF 1411

(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. LANGHORST, JESSICA, , ,

Mailing Address 3234 Birch Lane

City

Sturgeon Lake

State

MN

Zip Code

55783

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211713

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LANIER, ANNETTE, C, ,

Mailing Address 1251 Parkwood Drive

City

Cleveland

State

OH

Zip Code

44108

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH CN 8

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.02

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 22 / 2018

Transaction ID : SA11AI.210816

Amount of Each Receipt this Period

9.62

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LANIER, ANNETTE, C, ,

Mailing Address 1251 Parkwood Drive

City

Cleveland

State

OH

Zip Code

44108

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH CN 8

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210912

Amount of Each Receipt this Period

9.62

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

39.24

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 703 OF 1411

(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. LANZO, PHILLIP, M., ,

Mailing Address 607 Purdue Avenue

City
ElyriaState
OHZip Code
44035FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.209668

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LANZO, PHILLIP, M., ,

Mailing Address 607 Purdue Avenue

City
ElyriaState
OHZip Code
44035FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210316

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LAPORTE, EDWARD, , ,

Mailing Address 5622 Columbia

City
St. LouisState
MOZip Code
63139FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

762.79

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

Transaction ID : SA11AI.208252

Amount of Each Receipt this Period

76.28

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

94.28

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 704 OF 1411
(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. LARGENT, JERRY, L., ,Mailing Address 523 Main Street
Apt. D15City
GraftonState
OHZip Code
44044FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	6		2	0	1	8

Transaction ID : SA11AI.209038

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LARGENT, JERRY, L., ,Mailing Address 523 Main Street
Apt. D15City
GraftonState
OHZip Code
44044FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	9		2	0	1	8

Transaction ID : SA11AI.209669

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LARGENT, JERRY, L., ,Mailing Address 523 Main Street
Apt. D15City
GraftonState
OHZip Code
44044FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	3		2	0	1	8

Transaction ID : SA11AI.210317

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

30.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 705 OF 1411
(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. LAROCCA, JAMES, L., ,

Mailing Address P.O. Box 93143

City
ClevelandState
OHZip Code
44101FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
RESEARCHER III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.209039

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LAROCCA, JAMES, L., ,

Mailing Address P.O. Box 93143

City
ClevelandState
OHZip Code
44101FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
RESEARCHER III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209670

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LAROCCA, JAMES, L., ,

Mailing Address P.O. Box 93143

City
ClevelandState
OHZip Code
44101FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
RESEARCHER III

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210318

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

45.00

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 706 OF 1411

(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. LARRIMORE, ELLEN, M., ,

Mailing Address 4104 N Western Avenue

City
Chiacgo

State
IL

Zip Code
60618

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

SENIOR LIBRARY SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.40

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208253

Amount of Each Receipt this Period

20.84

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LARSEN, ELIZABETH, D., ,

Mailing Address 900 Grant Street SW

City
Tumwater

State
WA

Zip Code
98512

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28

Occupation (for Individual)

DIRECTOR OF ADMINISTRATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1214.62

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2018

Transaction ID : SA11AI.207874

Amount of Each Receipt this Period

110.42

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LATHAM, BRENDA, R., ,

Mailing Address 3140 Scottwood Road

City
Columbus

State
OH

Zip Code
43227

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

OFFICE ASSISTANT III

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

528.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209040

Amount of Each Receipt this Period

24.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

155.26

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 707 OF 1411

(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. LATHAM, BRENDA, R., ,

Mailing Address 3140 Scottwood Road

City
ColumbusState
OHZip Code
43227FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
OFFICE ASSISTANT III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

552.00

Date of Receipt

M M	D D	Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209671

Amount of Each Receipt this Period

24.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LATHAM, BRENDA, R., ,

Mailing Address 3140 Scottwood Road

City
ColumbusState
OHZip Code
43227FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
OFFICE ASSISTANT III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.00

Date of Receipt

M M	D D	Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210319

Amount of Each Receipt this Period

24.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LATNER, REBECCA, B., ,

Mailing Address 5805 Blaisdell Avenue

City
MinneapolisState
MNZip Code
55419FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MNOccupation (for Individual)
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
11	01	2018

Transaction ID : SA11AI.211714

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

78.00

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 708 OF 1411

(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. **LAWNICZAK, DEBORAH, A., ,**

Mailing Address 118 Hannum Avenue

City

Rossford

State

OH

Zip Code

43460

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

WORKERS COMPENSATION CLAIMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209041

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **LAWNICZAK, DEBORAH, A., ,**

Mailing Address 118 Hannum Avenue

City

Rossford

State

OH

Zip Code

43460

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

WORKERS COMPENSATION CLAIMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209672

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **LAWNICZAK, DEBORAH, A., ,**

Mailing Address 118 Hannum Avenue

City

Rossford

State

OH

Zip Code

43460

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

WORKERS COMPENSATION CLAIMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210320

Amount of Each Receipt this Period

14.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

42.00

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 709 OF 1411

(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. LAWRENCE, JOHN, S., ,

Mailing Address 6165 Albert Street
Apt. 311

City
North Ridgeville

State
OH

Zip Code
44039

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 ▼

517.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2018

Transaction ID : SA11AI.209042

Amount of Each Receipt this Period

23.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LAWRENCE, JOHN, S., ,

Mailing Address 6165 Albert Street
Apt. 311

City
North Ridgeville

State
OH

Zip Code
44039

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 ▼

540.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2018

Transaction ID : SA11AI.209673

Amount of Each Receipt this Period

23.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LAWRENCE, JOHN, S., ,

Mailing Address 6165 Albert Street
Apt. 311

City
North Ridgeville

State
OH

Zip Code
44039

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 ▼

564.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 11 / 23 / 2018

Transaction ID : SA11AI.210321

Amount of Each Receipt this Period

23.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 710 OF 1411

(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. LAZO-RICE, ANDREA, C., ,

Mailing Address 3216 16th Avenue S.

City
Minneapolis

State
MN

Zip Code
55407

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/HENNEPIN COUNTY

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211715

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEAL, MARIA, , ,

Mailing Address 865 Cabrillo Court

City
Gilroy

State
CA

Zip Code
95020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA CN 57

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2018

Transaction ID : SA11AI.211202

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEAL, MARIA, , ,

Mailing Address 865 Cabrillo Court

City
Gilroy

State
CA

Zip Code
95020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA CN 57

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 22 / 2018

Transaction ID : SA11AI.211215

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

50.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 711 OF 1411

(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. LEAL, MARIA, , ,

Mailing Address 865 Cabrillo Court

 City
 Gilroy

 State
 CA

 Zip Code
 95020

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME CA CN 57

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.211216

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEAL, MARIA, , ,

Mailing Address 865 Cabrillo Court

 City
 Gilroy

 State
 CA

 Zip Code
 95020

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME CA CN 57

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.211236

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEDWITZ, SCOTT, G., ,

 Mailing Address 1021 North Garfield Street
 Apt. #B33

 City
 Arlington

 State
 VA

 Zip Code
 22201

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME INT'L

 Occupation (for Individual)
 BUYER &N INVENTORY SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.206344

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 712 OF 1411

(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. LEDWITZ, SCOTT, G., ,Mailing Address 1021 North Garfield Street
Apt. #B33City
ArlingtonState
VAZip Code
22201FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
BUYER &N INVENTORY SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1060.48

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2018			

Transaction ID : SA11AI.206717

Amount of Each Receipt this Period

45.28

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEE, ANTOINETTE, , ,

Mailing Address P.O. Box 6728

City
AltadenaState
CAZip Code
91003FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 1902Occupation (for Individual)
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
10			19			2018			

Transaction ID : SA11AI.211061

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEE, ANTOINETTE, , ,

Mailing Address P.O. Box 6728

City
AltadenaState
CAZip Code
91003FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 1902Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			07			2018			

Transaction ID : SA11AI.211082

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

65.28

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 713 OF 1411
(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. LEE, ANTOINETTE, , ,

Mailing Address P.O. Box 6728

City

Altadena

State

CA

Zip Code

91003

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME CA LOC 1902

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	0			2	0	1	8		

Transaction ID : SA11AI.211103

Amount of Each Receipt this Period

10.00

☐

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEE, MICHELLE, J., ,

Mailing Address 4217 A King George Drive

City

Harrisburg

State

PA

Zip Code

17109

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			3	1			2	0	1	8		

Transaction ID : SA11AI.207085

Amount of Each Receipt this Period

50.00

☐

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEES, JOHN, M., ,

Mailing Address 6793 Spencer Road

City

Spencer

State

OH

Zip Code

44275

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
☐ Other (specify)

General

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			2	3			2	0	1	8		

Transaction ID : SA11AI.210322

Amount of Each Receipt this Period

8.50

☐

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

68.50

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 714 OF 1411

(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. LEESER, PATTY, A., ,

Mailing Address 353 S Chestnut Street

 City
 Pillow

 State
 PA

 Zip Code
 17080

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME PA CN 13/NSP/LOCAL 1593

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.207086

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEFTENANT, RENEE, M., ,

Mailing Address 1873 Jermain Drive

 City
 Columbus

 State
 OH

 Zip Code
 43219

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 CLERK II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.209044

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEFTENANT, RENEE, M., ,

Mailing Address 1873 Jermain Drive

 City
 Columbus

 State
 OH

 Zip Code
 43219

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 CLERK II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.209675

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 715 OF 1411

(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. LEFTENANT, RENEE, M., ,

Mailing Address 1873 Jermain Drive

City
Columbus

State
OH

Zip Code
43219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
CLERK II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210323

Amount of Each Receipt this Period

14.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LE GALLEY, LUZ, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 25 / 2018

Transaction ID : SA11AI.207446

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LE GALLEY, LUZ, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 09 / 2018

Transaction ID : SA11AI.207647

Amount of Each Receipt this Period

12.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

38.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 716 OF 1411

(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. LE GALLEY, LUZ, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207875

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEITCH, CANDACE, J., ,

Mailing Address 1001 N Cleveland Avenue

City

Fergus Falls

State

MN

Zip Code

56537

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211716

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LELIS, ROBERT, M., ,

Mailing Address 7805 Normandie Blvd.

Apt. E

City

Cleveland

State

OH

Zip Code

44130

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

429.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209045

Amount of Each Receipt this Period

19.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

51.50

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 717 OF 1411

(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. LELIS, ROBERT, M., ,

Mailing Address 7805 Normandie Blvd.
Apt. E

City Cleveland State OH Zip Code 44130

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

448.50

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209676

Amount of Each Receipt this Period

19.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LELIS, ROBERT, M., ,

Mailing Address 7805 Normandie Blvd.
Apt. E

City Cleveland State OH Zip Code 44130

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210324

Amount of Each Receipt this Period

19.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEMKE, RANDY, R., ,

Mailing Address 502 NW 6th Street

City Faribault State MN Zip Code 55021

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 01 / 2018

Transaction ID : SA11AI.211717

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

59.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 718 OF 1411

(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. LEONE, DINO, , ,

Mailing Address 9115 Turkey Hollow Rd.

City

Taylor Ridge

State

IL

Zip Code

61284

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

942.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208254

Amount of Each Receipt this Period

94.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LETUA, KIMBERLY, P., ,

Mailing Address 1426 North School Street

City

Honolulu

State

HI

Zip Code

96817

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME HI LOC 646

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

312.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.211286

Amount of Each Receipt this Period

41.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEVIN, REBECCA, R., ,

Mailing Address 1409 South Carolina Avenue SE

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

LEGISLATIVE AFFAIRS SPECIALIST II

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1155.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206346

Amount of Each Receipt this Period

56.28

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

192.15

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 719 OF 1411

(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. LEVIN, REBECCA, R., ,

Mailing Address 1409 South Carolina Avenue SE

City
Washington

State
DC

Zip Code
20003

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

LEGISLATIVE AFFAIRS SPECIALIST I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1211.28

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206719

Amount of Each Receipt this Period

56.28

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEWIS, ANTONIO, , ,

Mailing Address 808 Brookstone Circle

City
Atlanta

State
GA

Zip Code
30349

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

REGIONAL FIELD ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206347

Amount of Each Receipt this Period

25.34

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEWIS, ANTONIO, , ,

Mailing Address 808 Brookstone Circle

City
Atlanta

State
GA

Zip Code
30349

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

REGIONAL FIELD ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

640.34

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206720

Amount of Each Receipt this Period

25.34

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

106.96

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 720 OF 1411

(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. LEWIS, CORDELIA, M., ,

Mailing Address P.O. Box 5149

City
Boston

State
MA

Zip Code
02206-5149

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L/STATE STREET

Occupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 02 / 2018

Transaction ID : SA11AI.206721

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEWIS, JENNIE, A., ,

Mailing Address 390 Worthington Road

City
Westerville

State
OH

Zip Code
43082

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

588.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210325

Amount of Each Receipt this Period

49.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEWIS, JOSEPH, C., ,

Mailing Address 15739 Billet Road

City
Pontiac

State
IL

Zip Code
61764

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
CORRECTIONS OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208255

Amount of Each Receipt this Period

22.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

171.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 721 OF 1411

(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. LEWIS, MICHAEL, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207648

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEWIS, MICHAEL, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207876

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEWIS, OTHA, T., ,

Mailing Address 3077 Kemp Road

City
BeavercreekState
OHZip Code
45431FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209046

Amount of Each Receipt this Period

14.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

34.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 722 OF 1411

(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. LEWIS, OTHA, T., ,

Mailing Address 3077 Kemp Road

City
Beavercreek

State
OH

Zip Code
45431

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 ▼

333.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209677

Amount of Each Receipt this Period

14.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEWIS, OTHA, T., ,

Mailing Address 3077 Kemp Road

City
Beavercreek

State
OH

Zip Code
45431

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 ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210326

Amount of Each Receipt this Period

14.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEWIS, SANDRA, D., ,

Mailing Address 4614 Kuendinger Avenue

City
Dayton

State
OH

Zip Code
45417

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ACCOUNT CLERK III

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

363.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209047

Amount of Each Receipt this Period

16.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 723 OF 1411
(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. LEWIS, SANDRA, D., ,

Mailing Address 4614 Kuendinger Avenue

City
DaytonState
OHZip Code
45417FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ACCOUNT CLERK III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.50

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209678

Amount of Each Receipt this Period

16.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEWIS, SANDRA, D., ,

Mailing Address 4614 Kuendinger Avenue

City
DaytonState
OHZip Code
45417FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ACCOUNT CLERK III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210327

Amount of Each Receipt this Period

16.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEWIS-MUZZATTI, MICHELE, A., ,

Mailing Address 3705 Adams Drive

City
Silver SpringState
MDZip Code
20902FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L/STATE STREETOccupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

863.25

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	02	2018

Transaction ID : SA11AI.206722

Amount of Each Receipt this Period

78.93

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

111.93

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 724 OF 1411

(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. LEWIS-SIDIME, MARGARET, R., ,

Mailing Address 722 S Lyman Avenue

City
Oak ParkState
ILZip Code
60304FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

777.01

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208256

Amount of Each Receipt this Period

79.44

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEWIS-THOMAS, JOEL, A., ,

Mailing Address 101 West Third Street

City
DaytonState
OHZip Code
45402FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/DAYTONOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.42

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	23	2018

Transaction ID : SA11AI.210817

Amount of Each Receipt this Period

9.61

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEWIS-THOMAS, JOEL, A., ,

Mailing Address 101 West Third Street

City
DaytonState
OHZip Code
45402FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/DAYTONOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

221.03

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.210818

Amount of Each Receipt this Period

9.61

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

98.66

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 725 OF 1411
(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. LEWIS-THOMAS, JOEL, A., ,

Mailing Address 101 West Third Street

City
DaytonState
OHZip Code
45402FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/DAYTONOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.64

Date of Receipt

M M	D D	Y Y Y Y
11	13	2018

Transaction ID : SA11AI.210913

Amount of Each Receipt this Period

9.61

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LIGHT, VALERY, , ,

Mailing Address 32 Barley Lane

City
PalmyraState
PAZip Code
17078FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1199.70

Date of Receipt

M M	D D	Y Y Y Y
11	08	2018

Transaction ID : SA11AI.207087

Amount of Each Receipt this Period

106.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LIGNOUL, CHAD, , ,

Mailing Address 2816 Yale Drive

City
Granite CityState
ILZip Code
62040FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
CRAFTSMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M	D D	Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208257

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

135.91

TOTAL This Period (last page this line number only).....▶

X	11a		11b		11c		12		
	13		14		15		16		17

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

FEC Schedule A (Form 3X) Rev. 06/2016

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 727 OF 1411

(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. LINCOLN, DARRELL, , ,

Mailing Address 12405 Shady Oak Blvd.

City

Gsrfield Hts

State

OH

Zip Code

44125

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209679

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LINCOLN, DARRELL, , ,

Mailing Address 12405 Shady Oak Blvd.

City

Gsrfield Hts

State

OH

Zip Code

44125

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210328

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LINDALL, ANDERS, , ,

Mailing Address 2524 West Hutchinson

City

Chicago

State

IL

Zip Code

60618

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

848.60

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208258

Amount of Each Receipt this Period

84.86

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

112.86

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 728 OF 1411

(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. LINDHOLT, BRIAN, J., ,

Mailing Address 2311 McKinley Street NE

City
Minneapolis

State
MN

Zip Code
55418

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

472.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211719

Amount of Each Receipt this Period

24.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LINDHOLT, MICHAEL, , ,

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 (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1342.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211720

Amount of Each Receipt this Period

130.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LINDQUIST, TRISH, L., ,

Mailing Address 4101 Penn Avenue N

City
Minneapolis

State
MN

Zip Code
55412

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
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
11 / 01 / 2018

Transaction ID : SA11AI.211721

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

174.00

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 729 OF 1411

(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. LINDSEY, JOHN, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
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
11	09	2018

Transaction ID : SA11AI.207649

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LINDSEY, JOHN, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
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
11	26	2018

Transaction ID : SA11AI.207877

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LIPKO, THERESA, , ,

Mailing Address 117 South Main Street

City
CarbondaleState
PAZip Code
18407FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

913.62

Date of Receipt

M M	D D	Y Y Y Y
11	08	2018

Transaction ID : SA11AI.207088

Amount of Each Receipt this Period

78.42

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

98.42

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 730 OF 1411
(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. LIPKO, TOM, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 117 South Main Street <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: 1px solid black; padding: 2px;">City Carbondale</td> <td style="width: 15%; border: 1px solid black; padding: 2px;">State PA</td> <td style="width: 52%; border: 1px solid black; padding: 2px;">Zip Code 18407</td> </tr> </table> FEC ID number of contributing federal political committee. C			City Carbondale	State PA	Zip Code 18407	Date of Receipt <table style="width: 100%; border: none;"> <tr> <td style="border: 1px solid black; padding: 2px;">M M 11</td> <td style="border: 1px solid black; padding: 2px;">D D 08</td> <td style="border: 1px solid black; padding: 2px;">Y Y Y Y 2018</td> </tr> </table> Transaction ID : SA11AI.207089 Amount of Each Receipt this Period 156.86 ☐ Memo Item	M M 11	D D 08	Y Y Y Y 2018
City Carbondale	State PA	Zip Code 18407							
M M 11	D D 08	Y Y Y Y 2018							
Name of Employer (for Individual) AFSCME PA CN 13 Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼			Aggregate Year-to-Date ▼ 1725.46						

B. LIPPINCOTT, DEBORAH, M., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 5192 SW Old Clifton Road <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: 1px solid black; padding: 2px;">City Port Orchard</td> <td style="width: 15%; border: 1px solid black; padding: 2px;">State WA</td> <td style="width: 52%; border: 1px solid black; padding: 2px;">Zip Code 98367</td> </tr> </table> FEC ID number of contributing federal political committee. C			City Port Orchard	State WA	Zip Code 98367	Date of Receipt <table style="width: 100%; border: none;"> <tr> <td style="border: 1px solid black; padding: 2px;">M M 10</td> <td style="border: 1px solid black; padding: 2px;">D D 31</td> <td style="border: 1px solid black; padding: 2px;">Y Y Y Y 2018</td> </tr> </table> Transaction ID : SA11AI.206348 Amount of Each Receipt this Period 39.81 ☐ Memo Item	M M 10	D D 31	Y Y Y Y 2018
City Port Orchard	State WA	Zip Code 98367							
M M 10	D D 31	Y Y Y Y 2018							
Name of Employer (for Individual) AFSCME INT'L Occupation (for Individual) FIELD COORDINATOR Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼			Aggregate Year-to-Date ▼ 905.48						

C. LIPPINCOTT, DEBORAH, M., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 5192 SW Old Clifton Road <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: 1px solid black; padding: 2px;">City Port Orchard</td> <td style="width: 15%; border: 1px solid black; padding: 2px;">State WA</td> <td style="width: 52%; border: 1px solid black; padding: 2px;">Zip Code 98367</td> </tr> </table> FEC ID number of contributing federal political committee. C			City Port Orchard	State WA	Zip Code 98367	Date of Receipt <table style="width: 100%; border: none;"> <tr> <td style="border: 1px solid black; padding: 2px;">M M 11</td> <td style="border: 1px solid black; padding: 2px;">D D 15</td> <td style="border: 1px solid black; padding: 2px;">Y Y Y Y 2018</td> </tr> </table> Transaction ID : SA11AI.206723 Amount of Each Receipt this Period 39.81 ☐ Memo Item	M M 11	D D 15	Y Y Y Y 2018
City Port Orchard	State WA	Zip Code 98367							
M M 11	D D 15	Y Y Y Y 2018							
Name of Employer (for Individual) AFSCME INT'L Occupation (for Individual) FIELD COORDINATOR Receipt For: ☐ Primary ☐ General ☐ Other (specify)			Aggregate Year-to-Date ▼ 945.29						

SUBTOTAL of Receipts This Page (optional)..... ▶	236.48
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 731 OF 1411

(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. LIPSCO, SHEILA, M.,Mailing Address 1209 Newton Avenue
#1City
MinneapolisState
MNZip Code
55411FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	1			2	0	1	8		

Transaction ID : SA11AI.211722

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LITTLE, FRANCINE, M.,

Mailing Address 526 Ohio Avenue

City
RavennaState
OHZip Code
44266FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	8		

Transaction ID : SA11AI.209049

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LITTLE, FRANCINE, M.,

Mailing Address 526 Ohio Avenue

City
RavennaState
OHZip Code
44266FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	9			2	0	1	8		

Transaction ID : SA11AI.209680

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

56.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 732 OF 1411

(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. LITTLE, FRANCINE, M., ,

Mailing Address 526 Ohio Avenue

City

Ravenna

State

OH

Zip Code

44266

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 ▼

312.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210329

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LITTLE, JAMECIA, L., ,

Mailing Address 3237 Stirling Bridge

City

Canal Winchester

State

OH

Zip Code

43110

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

MANAGEMENT ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

858.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2018

Transaction ID : SA11AI.209050

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LITTLE, JAMECIA, L., ,

Mailing Address 3237 Stirling Bridge

City

Canal Winchester

State

OH

Zip Code

43110

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

MANAGEMENT ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

918.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2018

Transaction ID : SA11AI.210331

Amount of Each Receipt this Period

60.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

82.00

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 733 OF 1411

(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. LITTLE, JAMECIA, L., ,

Mailing Address 3237 Stirling Bridge

City

Canal Winchester

State

OH

Zip Code

43110

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

MANAGEMENT ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

927.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209681

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LITTLE, JAMECIA, L., ,

Mailing Address 3237 Stirling Bridge

City

Canal Winchester

State

OH

Zip Code

43110

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

MANAGEMENT ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

936.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210330

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LITTLE, SHERRY, L., ,

Mailing Address 544 E 118th Street

City

Cleveland

State

OH

Zip Code

44108

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

WORKERS COMP CLAIMS REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209051

Amount of Each Receipt this Period

9.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

27.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 734 OF 1411

(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. LITTLE, SHERRY, L., ,

Mailing Address 544 E 118th Street

City
ClevelandState
OHZip Code
44108FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
WORKERS COMP CLAIMS REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.50

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209682

Amount of Each Receipt this Period

9.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LITTLE, SHERRY, L., ,

Mailing Address 544 E 118th Street

City
ClevelandState
OHZip Code
44108FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
WORKERS COMP CLAIMS REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210332

Amount of Each Receipt this Period

9.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LITTLEFIELD, SUSANNE, M., ,

Mailing Address 1440 W Sherwin

City
ChiacgoState
ILZip Code
60626FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
AUDITOR III

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

208.40

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208259

Amount of Each Receipt this Period

20.84

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

39.84

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 735 OF 1411
(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. LITTON, BILLY, R., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 403 North Avenue <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: 1px solid black; padding: 2px;">City New Lexington</td> <td style="width: 15%; border: 1px solid black; padding: 2px;">State OH</td> <td style="width: 52%; border: 1px solid black; padding: 2px;">Zip Code 43764</td> </tr> </table> FEC ID number of contributing federal political committee. C <table style="width: 100%; border: none;"> <tr> <td style="width: 40%; border: none;"> Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH </td> <td style="width: 60%; border: none;"> Occupation (for Individual) PARKS CONSERVATION ANALYST </td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼			City New Lexington	State OH	Zip Code 43764	Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) PARKS CONSERVATION ANALYST	Date of Receipt M M / D D / Y Y Y Y Y 11 09 2018 Transaction ID : SA11AI.209683 Amount of Each Receipt this Period 9.00 ☐ Memo Item	
City New Lexington	State OH	Zip Code 43764							
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) PARKS CONSERVATION ANALYST								
B. LITTON, BILLY, R., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 403 North Avenue <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: 1px solid black; padding: 2px;">City New Lexington</td> <td style="width: 15%; border: 1px solid black; padding: 2px;">State OH</td> <td style="width: 52%; border: 1px solid black; padding: 2px;">Zip Code 43764</td> </tr> </table> FEC ID number of contributing federal political committee. C <table style="width: 100%; border: none;"> <tr> <td style="width: 40%; border: none;"> Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH </td> <td style="width: 60%; border: none;"> Occupation (for Individual) PARKS CONSERVATION ANALYST </td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼			City New Lexington	State OH	Zip Code 43764	Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) PARKS CONSERVATION ANALYST	Date of Receipt M M / D D / Y Y Y Y Y 11 23 2018 Transaction ID : SA11AI.210333 Amount of Each Receipt this Period 9.00 ☐ Memo Item	
City New Lexington	State OH	Zip Code 43764							
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) PARKS CONSERVATION ANALYST								
C. LIVESAY, REBECCA, E., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 116 Orange Street <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: 1px solid black; padding: 2px;">City Anna</td> <td style="width: 15%; border: 1px solid black; padding: 2px;">State IL</td> <td style="width: 52%; border: 1px solid black; padding: 2px;">Zip Code 62906</td> </tr> </table> FEC ID number of contributing federal political committee. C <table style="width: 100%; border: none;"> <tr> <td style="width: 40%; border: none;"> Name of Employer (for Individual) AFSCME IL CN 31/STATE OF IL </td> <td style="width: 60%; border: none;"> Occupation (for Individual) HUMAN SERVICES CASEWORKER </td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify)			City Anna	State IL	Zip Code 62906	Name of Employer (for Individual) AFSCME IL CN 31/STATE OF IL	Occupation (for Individual) HUMAN SERVICES CASEWORKER	Date of Receipt M M / D D / Y Y Y Y Y 11 05 2018 Transaction ID : SA11AI.208260 Amount of Each Receipt this Period 31.26 ☐ Memo Item	
City Anna	State IL	Zip Code 62906							
Name of Employer (for Individual) AFSCME IL CN 31/STATE OF IL	Occupation (for Individual) HUMAN SERVICES CASEWORKER								
SUBTOTAL of Receipts This Page (optional)..... ▶			 49.26						
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 736 OF 1411

(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. LLOYD, LONNIE, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207650

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LLOYD, LONNIE, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207878

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LOBB, KEVIN, S., ,

Mailing Address 701 4th Avenue NW

City
Austin

State
MN

Zip Code
55912

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211723

Amount of Each Receipt this Period

60.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 737 OF 1411

(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. LOEFFLER, CHARLES, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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 Y Y
10 / 25 / 2018

Transaction ID : SA11AI.207450

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LOEFFLER, CHARLES, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207651

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LOEFFLER, CHARLES, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207879

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

45.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 738 OF 1411

(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. LOGGHE, OLIVER, Z., ,Mailing Address 1441 Harvard Street NW
Apt. 31City
WashingtonState
DCZip Code
20009FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
DIGITAL MEDIA SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

623.89

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206349

Amount of Each Receipt this Period

31.86

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LOGGHE, OLIVER, Z., ,Mailing Address 1441 Harvard Street NW
Apt. 31City
WashingtonState
DCZip Code
20009FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
DIGITAL MEDIA SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

655.75

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	15	2018

Transaction ID : SA11AI.206724

Amount of Each Receipt this Period

31.86

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LONG, CHRISTOPHER, A., ,

Mailing Address 1200 Mulligan hill Road

City
New FlorenceState
PAZip Code
15944FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.207090

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

113.72

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 739 OF 1411

(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. LONG, FAYE, L., ,

Mailing Address 10406 Nelson Avenue

City
Cleveland

State
OH

Zip Code
44105

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
COOK II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210334

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LONG, PAUL, , ,

Mailing Address P.O. Box 310864

City
Flint

State
MI

Zip Code
48531

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MI CN 25

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

635.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211341

Amount of Each Receipt this Period

30.70

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LONG, PAUL, , ,

Mailing Address P.O. Box 310864

City
Flint

State
MI

Zip Code
48531

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MI CN 25

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

666.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 20 / 2018

Transaction ID : SA11AI.211388

Amount of Each Receipt this Period

30.70

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

69.90

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 740 OF 1411

(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. LONG, SHIRLEY, A., ,

Mailing Address 1518 Marlboro Drive

City
Lima

State
OH

Zip Code
45805

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 ▼

207.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209685

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LONG, SHIRLEY, A., ,

Mailing Address 1518 Marlboro Drive

City
Lima

State
OH

Zip Code
45805

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 ▼

216.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210335

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LONGSTREET, LISA, L., ,

Mailing Address 1143 E 145th Street

City
Cleveland

State
OH

Zip Code
44110

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
CLAIMS EXAMINER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

204.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210336

Amount of Each Receipt this Period

8.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

26.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LOPEZ, ALICIA, , ,Mailing Address 1865 W Greenleaf Avenue
Apt. DCity
AnaheimState
CAZip Code
92801FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 3930Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	7			2	0	1	8		

Transaction ID : SA11AI.211156

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LOPEZ, CARLOS, , ,

Mailing Address 15103 Gilmore Street

City

Van Nuys

State

CA

Zip Code

91411

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
RETIREE FIELD ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.36

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			3	1			2	0	1	8		

Transaction ID : SA11AI.206350

Amount of Each Receipt this Period

30.01

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LOPEZ, CARLOS, , ,

Mailing Address 15103 Gilmore Street

City

Van Nuys

State

CA

Zip Code

91411

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
RETIREE FIELD ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

575.37

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			1	5			2	0	1	8		

Transaction ID : SA11AI.206725

Amount of Each Receipt this Period

30.01

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.02

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 742 OF 1411

(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. LORENC, MAGGIE, , ,

Mailing Address 1700 W Summerdale Avenue

City
ChicagoState
ILZip Code
60640FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

848.60

Date of Receipt

M M	D D	Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208261

Amount of Each Receipt this Period

84.86

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LOUTSCH, JAMES, J., ,

Mailing Address 11405 Cedar Lane

City
BeltsvilleState
MDZip Code
20705FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

765.06

Date of Receipt

M M	D D	Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206351

Amount of Each Receipt this Period

38.63

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LOUTSCH, JAMES, J., ,

Mailing Address 11405 Cedar Lane

City
BeltsvilleState
MDZip Code
20705FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

803.69

Date of Receipt

M M	D D	Y Y Y Y
11	15	2018

Transaction ID : SA11AI.206726

Amount of Each Receipt this Period

38.63

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

162.12

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 743 OF 1411

☒ 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. LOVE, SABRINA, , ,

Mailing Address 23 Chadwick Drive

City
StaffordState
VAZip Code
22556FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
ADMINISTRATIVE ASSISTANT I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

723.53

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206352

Amount of Each Receipt this Period

32.25

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LOVE, SABRINA, , ,

Mailing Address 23 Chadwick Drive

City
StaffordState
VAZip Code
22556FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
ADMINISTRATIVE ASSISTANT I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

757.26

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	15	2018

Transaction ID : SA11AI.206727

Amount of Each Receipt this Period

33.73

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LOVELESS, CHARLES, M., ,Mailing Address 2100 11th Street NW
#206City
WashingtonState
DCZip Code
20001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L/STATE STREETOccupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1070.12

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	02	2018

Transaction ID : SA11AI.206728

Amount of Each Receipt this Period

97.84

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

163.82

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 744 OF 1411

(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. LOVERINK, CARLA, KAY, ,

Mailing Address 4320 NW Second Avenue

City

Des Moines

State

IA

Zip Code

50313

FEC ID number of contributing
federal political committee.

Name of Employer (for Individual)

AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.211845

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LOVERINK, CARLA, KAY, ,

Mailing Address 4320 NW Second Avenue

City

Des Moines

State

IA

Zip Code

50313

FEC ID number of contributing
federal political committee.

Name of Employer (for Individual)

AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.211911

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LOVICK, JANICE, A., ,

Mailing Address 2542 11th Avenue S

City

Minneapolis

State

MN

Zip Code

55404

FEC ID number of contributing
federal political committee.

Name of Employer (for Individual)

AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.211724

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 745 OF 1411

(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. LOWE, JOHN, S., ,

Mailing Address 5644 22nd Avenue South

City
Minneapolis

State
MN

Zip Code
55417

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
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
11 / 01 / 2018

Transaction ID : SA11AI.211725

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LOWREY, AMANDA, R., ,

Mailing Address 1374 Mailani Street

City
Hilo

State
HI

Zip Code
96720

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 152

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.35

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211005

Amount of Each Receipt this Period

20.85

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LOWREY, MICHAEL, J., ,

Mailing Address 1847 N. 2nd Street

City
Milwaukee

State
WI

Zip Code
53212

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WI CN 32/STATE OF WI

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.64

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2018

Transaction ID : SA11AI.211442

Amount of Each Receipt this Period

21.72

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

72.57

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 746 OF 1411

(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. LUCAS, STEVEN, S., ,

Mailing Address 57435 Boston way

City
Cambridge

State
OH

Zip Code
43725

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 ▼

242.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209056

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LUCAS, STEVEN, S., ,

Mailing Address 57435 Boston way

City
Cambridge

State
OH

Zip Code
43725

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 ▼

253.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209687

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LUCAS, STEVEN, S., ,

Mailing Address 57435 Boston way

City
Cambridge

State
OH

Zip Code
43725

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 ▼

264.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210337

Amount of Each Receipt this Period

11.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

33.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 747 OF 1411

(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. LUCERO, EARL, M., ,

Mailing Address 1896 Kionoole Street C
 Apt. C

City Hilo State HI Zip Code 96720

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 152

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2018

Transaction ID : SA11AI.211006

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LUCY, WILLIAM, , ,

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 (for Individual)
AFSCME INT'L/STATE STREET

Occupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2061.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2018

Transaction ID : SA11AI.206729

Amount of Each Receipt this Period

188.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LUEBKE, MELVIN, , ,

Mailing Address 190 W. Ostend Street
 Suite 101

City Baltimore State MD Zip Code 21230

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MD CN 3

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

394.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2018

Transaction ID : SA11AI.211323

Amount of Each Receipt this Period

98.70

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

312.16

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 748 OF 1411

(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. LUGO, CRYSTAL, J., ,

Mailing Address 21 Whispering Drive

City
Dayton

State
OH

Zip Code
45426

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 ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209057

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LUGO, CRYSTAL, J., ,

Mailing Address 21 Whispering Drive

City
Dayton

State
OH

Zip Code
45426

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 ▼

241.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209688

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LUGO, CRYSTAL, J., ,

Mailing Address 21 Whispering Drive

City
Dayton

State
OH

Zip Code
45426

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 ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210338

Amount of Each Receipt this Period

10.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

31.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 749 OF 1411

(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. LUGO, JERRY, , ,

Mailing Address 801 Fox Run #2

City
Findlay

State
OH

Zip Code
45840

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ODJFS CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209058

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LUGO, JERRY, , ,

Mailing Address 801 Fox Run #2

City
Findlay

State
OH

Zip Code
45840

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ODJFS CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209689

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LUGO, JERRY, , ,

Mailing Address 801 Fox Run #2

City
Findlay

State
OH

Zip Code
45840

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ODJFS CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210339

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 750 OF 1411
(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. LUKOW, MATTHEW, A., ,

Mailing Address 205 N. Michigan Ave

City
SpringfieldState
ILZip Code
62704FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

CORRECTIONS SR FOOD SERVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M	D D	Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208262

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LUNA, DENISE, ANN, ,

Mailing Address 38 River Lane

City
LevittownState
PAZip Code
19055FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME PA CN 13

Occupation (for Individual)

COURT CLERK ADMINISTRATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.00

Date of Receipt

M M	D D	Y Y Y Y
11	08	2018

Transaction ID : SA11AI.207091

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LUOKKALA, LISA, R., ,

Mailing Address 1020 N 9th Avenue E

City
DuluthState
MNZip Code
55805FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)

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
11	01	2018

Transaction ID : SA11AI.211726

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

142.00

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 751 OF 1411

(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. LUPO, BENJAMIN, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207652

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LUPO, BENJAMIN, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207880

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LURYE, WILLIAM, , ,

Mailing Address 17 Sherman Avenue

City
Takoma Park

State
MD

Zip Code
20912

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
CHIEF OF STAFF/GENERAL COUNSE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3215.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206353

Amount of Each Receipt this Period

157.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

177.50

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 752 OF 1411

(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. LURYE, WILLIAM, , ,

Mailing Address 17 Sherman Avenue

City
Takoma Park

State
MD

Zip Code
20912

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

CHIEF OF STAFF/GENERAL COUNSE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3372.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206730

Amount of Each Receipt this Period

157.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LYALL, JOHN, A., ,

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 (for Individual)

AFSCME OH CN 8

Occupation (for Individual)

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1462.70

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206154

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LYALL, JOHN, A., ,

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 (for Individual)

AFSCME OH CN 8

Occupation (for Individual)

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1594.84

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210914

Amount of Each Receipt this Period

132.14

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

303.64

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 753 OF 1411

☒ 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. LYBARGER, KATHRYN, , ,

Mailing Address 1548 Woolsey Street

City
BerkeleyState
CAZip Code
94703FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 3299Occupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M	D D	Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206155

Amount of Each Receipt this Period

28.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LYNCH, ROBERTA, , ,

Mailing Address 4650 N. Hermitage Street

City
ChicagoState
ILZip Code
60640FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31Occupation (for Individual)
DEPUTY DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1260.35

Date of Receipt

M M	D D	Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206156

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LYNCH, ROBERTA, , ,

Mailing Address 4650 N. Hermitage Street

City
ChicagoState
ILZip Code
60640FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31Occupation (for Individual)
DEPUTY DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1384.83

Date of Receipt

M M	D D	Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208263

Amount of Each Receipt this Period

124.48

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

166.48

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 754 OF 1411

(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. LYNCH, TINA, M., ,

Mailing Address 1202 N 14th Street

 City
 Harrisburg

 State
 PA

 Zip Code
 17103

 FEC ID number of contributing
 federal political committee.

Name of Employer (for Individual)

AFSCME PA CN 13

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2018

Transaction ID : SA11AI.207092

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LYONS, MARGARET, M., ,

Mailing Address 938 W Belle Plaine Avenue

 City
 Chicago

 State
 IL

 Zip Code
 60613

 FEC ID number of contributing
 federal political committee.

Name of Employer (for Individual)

AFSCME IL CN 31

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

Transaction ID : SA11AI.208264

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LYONS, ROBERT, , ,

Mailing Address 1605 Parmenter Street

 City
 Middleton

 State
 WI

 Zip Code
 53562

 FEC ID number of contributing
 federal political committee.

Name of Employer (for Individual)

AFSCME INT'L/STATE STREET

Occupation (for Individual)

RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2018

Transaction ID : SA11AI.206731

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 755 OF 1411

(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. MA'ELE, CHRISTOPHER, K., ,

Mailing Address 92-928 Palailai Street
#78

City
Kapolei

State
HI

Zip Code
96707

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 646

Occupation (for Individual)
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
11 / 09 / 2018

Transaction ID : SA11AI.211287

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MABE, BRENDA, L., ,

Mailing Address 34291 Brokaw Road

City

Columbia Station

State

OH

Zip Code

44028

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 ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209059

Amount of Each Receipt this Period

24.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MABE, BRENDA, L., ,

Mailing Address 34291 Brokaw Road

City

Columbia Station

State

OH

Zip Code

44028

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 ▼

564.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209690

Amount of Each Receipt this Period

24.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

68.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 756 OF 1411

(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. MABE, BRENDA, L., ,

Mailing Address 34291 Brokaw Road

City
Columbia Station

State
OH

Zip Code
44028

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 ▼

588.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210340

Amount of Each Receipt this Period

24.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MABE, CHRISTOPHER, A., ,

Mailing Address 34291 Brokaw Road

City
Columbia Station

State
OH

Zip Code
44028

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11

Occupation (for Individual)
CORRECTION SERGEANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2070.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209060

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MABE, CHRISTOPHER, A., ,

Mailing Address 34291 Brokaw Road

City
Columbia Station

State
OH

Zip Code
44028

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11

Occupation (for Individual)
CORRECTION SERGEANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210342

Amount of Each Receipt this Period

130.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

179.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 757 OF 1411
(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. MABE, CHRISTOPHER, A., ,

Mailing Address 34291 Brokaw Road

City
Columbia StationState
OHZip Code
44028FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11Occupation (for Individual)
CORRECTION SERGEANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2225.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209691

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MABE, CHRISTOPHER, A., ,

Mailing Address 34291 Brokaw Road

City
Columbia StationState
OHZip Code
44028FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11Occupation (for Individual)
CORRECTION SERGEANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2250.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210341

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MACIAS, CANDELARIO, V., ,

Mailing Address 4833 Powell Avenue

City
Las VegasState
NVZip Code
89121FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

932.20

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206354

Amount of Each Receipt this Period

44.36

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

94.36

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 758 OF 1411

(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. MACIAS, CANDELARIO, V., ,

Mailing Address 4833 Powell Avenue

City

Las Vegas

State

NV

Zip Code

89121

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

976.56

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206732

Amount of Each Receipt this Period

44.36

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MACIAS, DEBBIE, , ,

Mailing Address 652 N 18th Street

City

Banning

State

CA

Zip Code

92220

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME CA CN 57

Occupation (for Individual)

BUSINESS AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 24 / 2018

Transaction ID : SA11AI.211237

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MACIAS, RUBEN, , ,

Mailing Address 670 So. Vancouver Avenue
Apt. A

City

Los Angeles

State

CA

Zip Code

90022

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME CA LOC 1902

Occupation (for Individual)

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
10 / 19 / 2018

Transaction ID : SA11AI.211062

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.36

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 759 OF 1411

(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. MACIAS, RUBEN, , ,

Mailing Address 670 So. Vancouver Avenue
Apt. A

City
Los Angeles

State
CA

Zip Code
90022

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 1902

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211083

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MACIAS, RUBEN, , ,

Mailing Address 670 So. Vancouver Avenue
Apt. A

City
Los Angeles

State
CA

Zip Code
90022

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 1902

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 20 / 2018

Transaction ID : SA11AI.211104

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MACKEY, ELLEN, , ,

Mailing Address 8300 Valecrest Drive

City
Sun Valley

State
CA

Zip Code
91352

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 1902

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 19 / 2018

Transaction ID : SA11AI.211063

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

30.00

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 760 OF 1411

(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. MACKEY, ELLEN, , ,

Mailing Address 8300 Valecrest Drive

City

Sun Valley

State

CA

Zip Code

91352

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME CA LOC 1902

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

11 / 07 / 2018

Transaction ID : SA11AI.211084

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MACKEY, ELLEN, , ,

Mailing Address 8300 Valecrest Drive

City

Sun Valley

State

CA

Zip Code

91352

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME CA LOC 1902

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 20 / 2018

Transaction ID : SA11AI.211105

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MACSKIMMING, NEEDRA, A., ,

Mailing Address 309 Third Street

City

Summerdale

State

PA

Zip Code

17093

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

10 / 31 / 2018

Transaction ID : SA11AI.207093

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 761 OF 1411

(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. **MADDOX, CNE, E., ,**

Mailing Address 423 Capitol View Drive

City
Columbus

State
OH

Zip Code
43203

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HOUSING DEV. ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210343

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **MADELINE, BRIAN, J., ,**

Mailing Address 617 N Saint Clair Street

City
Girard

State
OH

Zip Code
44420

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 ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210344

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **MADISON, PAUL, E., ,**

Mailing Address P.O. Box 2010

City
Minneapolis

State
MN

Zip Code
55402

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

248.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211727

Amount of Each Receipt this Period

36.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

53.00

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 762 OF 1411

(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. MAGGARD, JAMES, L., ,

Mailing Address 4204 Pennyroyal Road

City
Franklin

State
OH

Zip Code
45005

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 SERGEANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210345

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MAGNANT, TERRY, , ,

Mailing Address 8033 Excelsior Drive
Suite C

City
Madison

State
WI

Zip Code
53717

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WI CN 32/MBR

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.64

Date of Receipt

11 / 14 / 2018

Transaction ID : SA11AI.211443

Amount of Each Receipt this Period

19.72

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MAGNUSON, CHRISTINE, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.207653

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

38.22

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 763 OF 1411
(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. MAGNUSON, CHRISTINE, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	M	D	D	D	Y	Y	Y	Y	Y	Y
1	1	1	2	6		2	0	1	8		

Transaction ID : SA11AI.207881

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MAGUIRE, JOHN, , ,

Mailing Address 6800 N High Street

City
WorthingtonState
OHZip Code
43085FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

702.08

Date of Receipt

M	M	M	D	D	D	Y	Y	Y	Y	Y	Y
1	1	1	0	6		2	0	1	8		

Transaction ID : SA11AI.210915

Amount of Each Receipt this Period

65.06

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MAGUIRE, MICHAEL, P., ,

Mailing Address 20 Duffield Drive

City
LititzState
PAZip Code
17543FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1004.63

Date of Receipt

M	M	M	D	D	D	Y	Y	Y	Y	Y	Y
1	1	1	0	8		2	0	1	8		

Transaction ID : SA11AI.207094

Amount of Each Receipt this Period

89.30

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

164.36

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 764 OF 1411

(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. MAHOLIC, LOUIS, J., ,

Mailing Address 2726 Juno Place
Apt. #2

City
Fairlawn

State
OH

Zip Code
44333

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

761.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210916

Amount of Each Receipt this Period

69.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MAKAILA, KEHAULANI, A., ,

Mailing Address 41-930 Kalaniana'ole Hwy.

City
waimanalo

State
HI

Zip Code
96795

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 152

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211007

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MALDONADO, DAVID, Z., ,

Mailing Address 1338 W 9th Street

City
Lorain

State
OH

Zip Code
44052

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 ▼

253.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209064

Amount of Each Receipt this Period

11.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

121.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 765 OF 1411
(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. MALDONADO, DAVID, Z., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 1338 W 9th Street City Lorain State OH Zip Code 44052 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 ▼ 264.50			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 09 / 2018 Transaction ID : SA11AI.209695 Amount of Each Receipt this Period 11.50 ☐ Memo Item
B. MALDONADO, DAVID, Z., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 1338 W 9th Street City Lorain State OH Zip Code 44052 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 ▼ 276.00			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 23 / 2018 Transaction ID : SA11AI.210346 Amount of Each Receipt this Period 11.50 ☐ Memo Item
C. MALDONADO, MATTHEW, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address P.O. Box 1712 City Claremont State CA Zip Code 91711 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME CA LOC 3930 Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 924.00			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 07 / 2018 Transaction ID : SA11AI.211157 Amount of Each Receipt this Period 84.00 ☐ Memo Item
SUBTOTAL of Receipts This Page (optional)..... ▶			107.00
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 766 OF 1411

(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. MALDONADO, MIGUEL, , ,

Mailing Address 106 Topsfield Farm Circle

City
Englewood

State
OH

Zip Code
45322

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ELECTRICIAN II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209065

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MALDONADO, MIGUEL, , ,

Mailing Address 106 Topsfield Farm Circle

City
Englewood

State
OH

Zip Code
45322

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ELECTRICIAN II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209696

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MALDONADO, MIGUEL, , ,

Mailing Address 106 Topsfield Farm Circle

City
Englewood

State
OH

Zip Code
45322

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ELECTRICIAN II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210347

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 767 OF 1411
(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. MANDUSIC, STEPHEN, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 2469 Haviland Court <table border="1"> <tr> <td>City Mansfield</td> <td>State OH</td> <td>Zip Code 44903</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1"> <tr> <td>Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH</td> <td>Occupation (for Individual) CORRECTION OFFICER</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼			City Mansfield	State OH	Zip Code 44903	Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) CORRECTION OFFICER	Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td>26</td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.209066 Amount of Each Receipt this Period <table border="1"> <tr> <td>10.00</td> </tr> </table> ☐ Memo Item	M M M	D D D	Y Y Y Y Y Y	10	26	2018	10.00
City Mansfield	State OH	Zip Code 44903													
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) CORRECTION OFFICER														
M M M	D D D	Y Y Y Y Y Y													
10	26	2018													
10.00															
B. MANDUSIC, STEPHEN, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 2469 Haviland Court <table border="1"> <tr> <td>City Mansfield</td> <td>State OH</td> <td>Zip Code 44903</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1"> <tr> <td>Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH</td> <td>Occupation (for Individual) CORRECTION OFFICER</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼			City Mansfield	State OH	Zip Code 44903	Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) CORRECTION OFFICER	Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td>09</td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.209697 Amount of Each Receipt this Period <table border="1"> <tr> <td>10.00</td> </tr> </table> ☐ Memo Item	M M M	D D D	Y Y Y Y Y Y	11	09	2018	10.00
City Mansfield	State OH	Zip Code 44903													
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) CORRECTION OFFICER														
M M M	D D D	Y Y Y Y Y Y													
11	09	2018													
10.00															
C. MANDUSIC, STEPHEN, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 2469 Haviland Court <table border="1"> <tr> <td>City Mansfield</td> <td>State OH</td> <td>Zip Code 44903</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1"> <tr> <td>Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH</td> <td>Occupation (for Individual) CORRECTION OFFICER</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼			City Mansfield	State OH	Zip Code 44903	Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) CORRECTION OFFICER	Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td>23</td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.210348 Amount of Each Receipt this Period <table border="1"> <tr> <td>10.00</td> </tr> </table> ☐ Memo Item	M M M	D D D	Y Y Y Y Y Y	11	23	2018	10.00
City Mansfield	State OH	Zip Code 44903													
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) CORRECTION OFFICER														
M M M	D D D	Y Y Y Y Y Y													
11	23	2018													
10.00															
SUBTOTAL of Receipts This Page (optional).....			<table border="1"> <tr> <td>30.00</td> </tr> </table>	30.00											
30.00															
TOTAL This Period (last page this line number only).....			<table border="1"> <tr> <td></td> </tr> </table>												

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 768 OF 1411

(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. MANGRUM, AUGUSTUS, M., , JR.

Mailing Address 1000 S Williams Street

City
WestmontState
ILZip Code
60559FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
CORRECTIONS OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				05				2018					

Transaction ID : SA11AI.208265

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MANN, STACY, L ., ,Mailing Address 2626 Travis Road
Apt. ACity
ColumbusState
OHZip Code
43209FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
WIC VENDOR SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				26				2018					

Transaction ID : SA11AI.209067

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MANN, STACY, L ., ,Mailing Address 2626 Travis Road
Apt. ACity
ColumbusState
OHZip Code
43209FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
WIC VENDOR SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

253.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				09				2018					

Transaction ID : SA11AI.209698

Amount of Each Receipt this Period

11.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

43.00

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 769 OF 1411

(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. MANN, STACY, L., ,

Mailing Address 2626 Travis Road
Apt. A

City
Columbus

State
OH

Zip Code
43209

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
WIC VENDOR SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210349

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MARBURGER, JOSHUA, D., ,

Mailing Address 15901 W Cottonwood Street

City

Surprise

State

AZ

Zip Code

85374

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

502.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206355

Amount of Each Receipt this Period

25.34

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MARBURGER, JOSHUA, D., ,

Mailing Address 15901 W Cottonwood Street

City

Surprise

State

AZ

Zip Code

85374

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

528.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206733

Amount of Each Receipt this Period

25.34

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

61.68

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 770 OF 1411

(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. MARCELLIN-BURGESS, WENDY, N., ,

Mailing Address 15943 Dorset Road

City
Laurel

State
MD

Zip Code
20707

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

MEETING & TRAVEL COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1243.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 31 2018

Transaction ID : SA11AI.206356

Amount of Each Receipt this Period

61.27

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MARCELLIN-BURGESS, WENDY, N., ,

Mailing Address 15943 Dorset Road

City
Laurel

State
MD

Zip Code
20707

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

MEETING & TRAVEL COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1304.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 15 2018

Transaction ID : SA11AI.206734

Amount of Each Receipt this Period

61.27

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MARCUS, GENEVIEVE, R., ,

Mailing Address 1419 Dunster Lane

City
Potomac

State
MD

Zip Code
20854

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

957.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 31 2018

Transaction ID : SA11AI.206357

Amount of Each Receipt this Period

45.20

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

167.74

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 771 OF 1411

(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. MARCUS, GENEVIEVE, R., ,

Mailing Address 1419 Dunster Lane

City
Potomac

State
MD

Zip Code
20854

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1002.85

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206735

Amount of Each Receipt this Period

45.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MARK, PHILIP, I., ,

Mailing Address 7043 W 73rd Place

City
Chicago

State
IL

Zip Code
60638

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

HUMAN SERVICES CASEWORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208266

Amount of Each Receipt this Period

38.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MARKS, JULIE, , ,

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 ▼

526.54

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207095

Amount of Each Receipt this Period

48.94

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

132.14

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 772 OF 1411

(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. MARKS, TINA, A., ,

Mailing Address 577 Price Road

City
Newark

State
OH

Zip Code
43055

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ACCOUNTANT/EXAMINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

539.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209068

Amount of Each Receipt this Period

24.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MARKS, TINA, A., ,

Mailing Address 577 Price Road

City
Newark

State
OH

Zip Code
43055

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ACCOUNTANT/EXAMINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

563.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209699

Amount of Each Receipt this Period

24.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MARKS, TINA, A., ,

Mailing Address 577 Price Road

City
Newark

State
OH

Zip Code
43055

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ACCOUNTANT/EXAMINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

588.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210350

Amount of Each Receipt this Period

24.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

73.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 773 OF 1411

(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. MARLER, DENISE, , ,

Mailing Address 122 Wilson Court

City

Granite City

State

IL

Zip Code

62040

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

INTAKE SPECIALIST

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208267

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MARRONE, KYLE, A., ,Mailing Address 5701 Chevrolet Blvd.
Apt. C118

City

Cleveland

State

OH

Zip Code

44130

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
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209700

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MARRONE, KYLE, A., ,Mailing Address 5701 Chevrolet Blvd.
Apt. C118

City

Cleveland

State

OH

Zip Code

44130

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
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210351

Amount of Each Receipt this Period

9.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

38.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 774 OF 1411

(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. MARSH, WAYNE, A., ,

Mailing Address 2910 Fairmont Street

City
Falls Church

State
VA

Zip Code
22042

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
CHIEF ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

959.87

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206358

Amount of Each Receipt this Period

48.28

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MARSH, WAYNE, A., ,

Mailing Address 2910 Fairmont Street

City
Falls Church

State
VA

Zip Code
22042

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
CHIEF ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1008.15

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206736

Amount of Each Receipt this Period

48.28

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MARSHALL-HOWELL, DENA, M., ,

Mailing Address 2309 W Iles Avenue

City
Springfield

State
IL

Zip Code
62704

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
SOCIAL SERV PROGRAM

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208268

Amount of Each Receipt this Period

33.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

129.56

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 775 OF 1411

(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. MARSHALL-HOWELL, LYNN, , ,

Mailing Address 2309 W Iles Avenue

City
Springfield

State
IL

Zip Code
62704

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 PROTECTION SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208269

Amount of Each Receipt this Period

33.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MARTIN, BETH, A., ,

Mailing Address 856 Prouty Avenue

City
Toledo

State
OH

Zip Code
43609

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
THERAPUTIC PROGRAM WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209070

Amount of Each Receipt this Period

12.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MARTIN, BETH, A., ,

Mailing Address 856 Prouty Avenue

City
Toledo

State
OH

Zip Code
43609

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
THERAPUTIC PROGRAM WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209701

Amount of Each Receipt this Period

12.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

58.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 776 OF 1411

(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. MARTIN, BETH, A., ,

Mailing Address 856 Prouty Avenue

City
Toledo

State
OH

Zip Code
43609

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
THERAPUTIC PROGRAM WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210352

Amount of Each Receipt this Period

12.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MARTIN, CINDY, J., ,

Mailing Address 414 - 21st Street

City
Cloquet

State
MN

Zip Code
55720

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
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
11 / 01 / 2018

Transaction ID : SA11AI.211728

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MARTIN, ELIZA, , ,

Mailing Address 91-208 Kekepania Place E.

City
Kapolei

State
HI

Zip Code
96707-2721

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI RET CHPT 152

Occupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211042

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

57.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 777 OF 1411

(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. MARTIN, KRISTOPHER, R., , SR.

Mailing Address 1206 Garden Street

City
Alton

State
IL

Zip Code
62002

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
SEC THERAPY AIDE I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208270

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MARTIN, LISA, G., ,

Mailing Address 4621 28th Road S.
Apt. C

City
Arlington

State
VA

Zip Code
22206

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
EXECUTIVE OFFICE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1093.56

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206359

Amount of Each Receipt this Period

52.44

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MARTIN, LISA, G., ,

Mailing Address 4621 28th Road S.
Apt. C

City
Arlington

State
VA

Zip Code
22206

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
EXECUTIVE OFFICE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1146.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206737

Amount of Each Receipt this Period

52.44

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

146.88

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 778 OF 1411

(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. MARTIN, NORMA, G., ,

Mailing Address 517 State Road NW

City
Warren

State
OH

Zip Code
44483

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/WARREN OH RH

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.210820

Amount of Each Receipt this Period

9.62

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MARTIN, NORMA, G., ,

Mailing Address 517 State Road NW

City
Warren

State
OH

Zip Code
44483

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/WARREN OH RH

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 13 / 2018

Transaction ID : SA11AI.210821

Amount of Each Receipt this Period

9.62

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MARTIN, NORMA, G., ,

Mailing Address 517 State Road NW

City
Warren

State
OH

Zip Code
44483

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/WARREN OH RH

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

221.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.210917

Amount of Each Receipt this Period

9.62

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

28.86

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 779 OF 1411

(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. MARTIN, WANDA, D., ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.207654

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MARTIN, WANDA, D., ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 26 / 2018

Transaction ID : SA11AI.207882

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MARTINSON, BRENDA, L., ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

209.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.207655

Amount of Each Receipt this Period

11.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

31.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 780 OF 1411

(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. MARTINSON, BRENDA, L., ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	26	2018

Transaction ID : SA11AI.207883

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MASH, RAE, D., ,

Mailing Address 256 Locust Drive

City
LondonState
OHZip Code
43140FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
BOND ACCOUNTANT II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209702

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MASH, RAE, D., ,

Mailing Address 256 Locust Drive

City
LondonState
OHZip Code
43140FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
BOND ACCOUNTANT II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210353

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

29.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 781 OF 1411

(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. MASON, BETH, A., ,

Mailing Address 3824 Golden Eagle Loop SE

City
LaceyState
WAZip Code
98513FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2018

Transaction ID : SA11AI.207285

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MASON, BETH, A., ,

Mailing Address 3824 Golden Eagle Loop SE

City
LaceyState
WAZip Code
98513FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2018

Transaction ID : SA11AI.207209

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MASON, BETH, A., ,

Mailing Address 3824 Golden Eagle Loop SE

City
LaceyState
WAZip Code
98513FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		14		2018

Transaction ID : SA11AI.207210

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

220.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 782 OF 1411

(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. MASON, CHERYLE, A., ,

Mailing Address 1608 Berkeley Road

City
ColumbusState
OHZip Code
43207FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
THERAPUTIC PROGRAM WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210354

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MASON, VALERIE, M., ,

Mailing Address 3633 N Dixie Highway

City
LimaState
OHZip Code
45801FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2018

Transaction ID : SA11AI.209073

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MASON, VALERIE, M., ,

Mailing Address 3633 N Dixie Highway

City
LimaState
OHZip Code
45801FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.209704

Amount of Each Receipt this Period

14.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

36.50

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 783 OF 1411

(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. MASON, VALERIE, M., ,

Mailing Address 3633 N Dixie Highway

City
Lima

State
OH

Zip Code
45801

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 ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210355

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MASSENGILL-BERNARDIN, KIMBERLY, A., ,

Mailing Address 8000 Brookpoint Place

City

Westerville

State
OH

Zip Code
43081

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8

Occupation (for Individual)
ASSOCIATE COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

875.60

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210918

Amount of Each Receipt this Period

79.96

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MASSEY, JASON, L ., ,

Mailing Address 151 Rae Avenue

City

Mansfield

State
OH

Zip Code
44903

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 ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210356

Amount of Each Receipt this Period

8.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

102.46

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 784 OF 1411

(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. MASSEY, PAMELA, M., ,

Mailing Address 3012 Forest Lane

City
Lorain

State
OH

Zip Code
44053

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 ▼

286.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209075

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MASSEY, PAMELA, M., ,

Mailing Address 3012 Forest Lane

City
Lorain

State
OH

Zip Code
44053

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 ▼

299.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209706

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MASSEY, PAMELA, M., ,

Mailing Address 3012 Forest Lane

City
Lorain

State
OH

Zip Code
44053

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 ▼

312.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210357

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

39.00

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 785 OF 1411

(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. MASSIE, SONYA, , ,

Mailing Address 4855 Seminole Drive

City
San Diego

State
CA

Zip Code
92115

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 3930

Occupation (for Individual)
STAFF 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
11 / 07 / 2018

Transaction ID : SA11AI.211158

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MASTEN, GARY, , ,

Mailing Address 403 Arledge Lane SW
Apt. 17A

City
Olympia

State
WA

Zip Code
98502

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 09 / 2018

Transaction ID : SA11AI.207656

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MASTEN, GARY, , ,

Mailing Address 403 Arledge Lane SW
Apt. 17A

City
Olympia

State
WA

Zip Code
98502

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 26 / 2018

Transaction ID : SA11AI.207884

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

41.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 786 OF 1411

(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. MATOUSHEK, MELISSA, , ,

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 ▼

603.24

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207096

Amount of Each Receipt this Period

54.84

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MATTHEWS, SYLVIA, C., ,

Mailing Address 2337 Dunning Court

City
Columbus

State
OH

Zip Code
43219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

ODJFS CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209076

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MATTHEWS, SYLVIA, C., ,

Mailing Address 2337 Dunning Court

City
Columbus

State
OH

Zip Code
43219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

ODJFS CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

253.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209707

Amount of Each Receipt this Period

11.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

76.84

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 787 OF 1411

(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. MATTHEWS, SYLVIA, C., ,

Mailing Address 2337 Dunning Court

City
Columbus

State
OH

Zip Code
43219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ODJFS CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210358

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MATTHIAS, LARRY, F., ,

Mailing Address 321 E Ballard Road

City
Colbert

State
WA

Zip Code
99005

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/COMM COLLEGE

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207657

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MATTHIAS, LARRY, F., ,

Mailing Address 321 E Ballard Road

City
Colbert

State
WA

Zip Code
99005

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/COMM COLLEGE

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207885

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

31.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 788 OF 1411

(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. MATTHIES, MARK, M., ,

Mailing Address 900 Grant Street SW

City
TumwaterState
WAZip Code
98512FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	25	2018

Transaction ID : SA11AI.207457

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MATTHIES, MARK, M., ,

Mailing Address 900 Grant Street SW

City
TumwaterState
WAZip Code
98512FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.207658

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MATTHIES, MARK, M., ,

Mailing Address 900 Grant Street SW

City
TumwaterState
WAZip Code
98512FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	26	2018

Transaction ID : SA11AI.207886

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

45.00

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 789 OF 1411

(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. MATUNDAN, JILLIAN, P., ,

Mailing Address 597 James Cirone Way

City
Herndon

State
VA

Zip Code
20170

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

DIRECTOR, CONFERENCE AND TRA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2714.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206361

Amount of Each Receipt this Period

130.61

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MATUNDAN, JILLIAN, P., ,

Mailing Address 597 James Cirone Way

City
Herndon

State
VA

Zip Code
20170

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

DIRECTOR, CONFERENCE AND TRA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2844.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206739

Amount of Each Receipt this Period

130.61

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MAUHILI, REBECCA, L., ,

Mailing Address 888 Mililani Street
Suite 601

City
Honolulu

State
HI

Zip Code
96813-2991

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME HI RET CHPT 152

Occupation (for Individual)

RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211043

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

281.22

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MAY, ALEXANDRA, , ,

Mailing Address 1345 26th Avenue

City

San Francisco

State

CA

Zip Code

94122

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME CA CN 57

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

200.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211238

Amount of Each Receipt this Period

16.70

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MAY, GERALD, K., ,

Mailing Address 936 Rice Street

City

Springfield

State

OH

Zip Code

45505

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
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

242.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209077

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MAY, GERALD, K., ,

Mailing Address 936 Rice Street

City

Springfield

State

OH

Zip Code

45505

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
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

253.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209708

Amount of Each Receipt this Period

11.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

38.70

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 791 OF 1411

(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. MAY, GERALD, K., ,

Mailing Address 936 Rice Street

City
Springfield

State
OH

Zip Code
45505

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 ▼

264.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210360

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MAYER, DAVID, C ., ,

Mailing Address 5910 Signature Drive

City
Galloway

State
OH

Zip Code
43119

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 ▼

204.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210361

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MAYERS, MATTHEW, , ,

Mailing Address 1833 Ontario Place NW

City
Washington

State
DC

Zip Code
20009

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
MANAGER, STRATEGIC RESEARCH

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1455.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206362

Amount of Each Receipt this Period

66.31

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

85.81

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 792 OF 1411

(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. MAYERS, MATTHEW, , ,

Mailing Address 1833 Ontario Place NW

City
Washington

State
DC

Zip Code
20009

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

MANAGER, STRATEGIC RESEARCH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1522.12

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206740

Amount of Each Receipt this Period

66.31

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MAYFIELD, TRINA, , ,

Mailing Address 206 17th Street

City
Cairo

State
IL

Zip Code
62914

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

PUBLIC SERVICE ADMIN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.82

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208271

Amount of Each Receipt this Period

31.26

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MAYLE, LISA, M., ,

Mailing Address 255 E Buckeye Ridge Road

City
Stockport

State
OH

Zip Code
43787

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

ADMINISTRATIVE PROFESSIONAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

279.40

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209079

Amount of Each Receipt this Period

12.70

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.27

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MAYLE, LISA, M., ,

Mailing Address 255 E Buckeye Ridge Road

City
StockportState
OHZip Code
43787FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ADMINISTRATIVE PROFESSIONAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.10

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209710

Amount of Each Receipt this Period

12.70

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MAYLE, LISA, M., ,

Mailing Address 255 E Buckeye Ridge Road

City
StockportState
OHZip Code
43787FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ADMINISTRATIVE PROFESSIONAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.80

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210362

Amount of Each Receipt this Period

12.70

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MAYS, CRYSTAL, A., ,

Mailing Address 411 E 264th Street

City
EuclidState
OHZip Code
44132FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
THERAPUTIC PROGRAM TECHNICIAI

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209711

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

34.40

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 794 OF 1411

(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. MAYS, CRYSTAL, A., ,

Mailing Address 411 E 264th Street

City
Euclid

State
OH

Zip Code
44132

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210363

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCALLISTER, ANDI, C., ,

Mailing Address 2489 Argyle Drive

City
Columbus

State
OH

Zip Code
43219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
OFFICE PROFESSIONAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210364

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCALLISTER, TIMOTHY, W., ,

Mailing Address 5379 Red Wynne Lane

City
Hilliard

State
OH

Zip Code
43026

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
PROGRAMMER ANALYST V

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

396.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209082

Amount of Each Receipt this Period

18.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

35.50

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 795 OF 1411

(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. MCALLISTER, TIMOTHY, W., ,

Mailing Address 5379 Red Wynne Lane

City
Hilliard

State
OH

Zip Code
43026

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
PROGRAMMER ANALYST V

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

414.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209713

Amount of Each Receipt this Period

18.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCALLISTER, TIMOTHY, W., ,

Mailing Address 5379 Red Wynne Lane

City
Hilliard

State
OH

Zip Code
43026

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
PROGRAMMER ANALYST V

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210365

Amount of Each Receipt this Period

18.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCBRIDE, ELISSA, , ,

Mailing Address 9 Sherman Avenue

City
Takoma Park

State
MD

Zip Code
20912

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
SECRETARY TREASURER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3451.80

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206363

Amount of Each Receipt this Period

172.59

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

208.59

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCBRIDE, ELISSA, , ,

Mailing Address 9 Sherman Avenue

City
Takoma ParkState
MDZip Code
20912FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
SECRETARY TREASURER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3624.39

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2018			

Transaction ID : SA11AI.206741

Amount of Each Receipt this Period

172.59

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCCAMISH, BOYD, B., ,

Mailing Address 240 Ravine Bluff Drive

City
NewarkState
OHZip Code
43055FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1790.70

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2018			

Transaction ID : SA11AI.206364

Amount of Each Receipt this Period

107.55

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCCAMISH, BOYD, B., ,

Mailing Address 240 Ravine Bluff Drive

City
NewarkState
OHZip Code
43055FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1898.25

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2018			

Transaction ID : SA11AI.206742

Amount of Each Receipt this Period

107.55

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

387.69

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

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(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. MCCANN, MARGARET, , ,

Mailing Address 103 Lynnmore Drive

City
Silver Spring

State
MD

Zip Code
20901

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ASSOCIATE GENERAL COUNSEL II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1352.60

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206365

Amount of Each Receipt this Period

66.63

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCCANN, MARGARET, , ,

Mailing Address 103 Lynnmore Drive

City
Silver Spring

State
MD

Zip Code
20901

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ASSOCIATE GENERAL COUNSEL II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1419.23

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206743

Amount of Each Receipt this Period

66.63

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCCANTS, ANDY, , ,

Mailing Address 1210 195th Street E.

City
Spanaway

State
WA

Zip Code
98387

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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 Y
10 / 25 / 2018

Transaction ID : SA11AI.207659

Amount of Each Receipt this Period

21.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

154.26

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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee 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. MCCANTS, ANDY, , ,

Mailing Address 1210 195th Street E.

City
Spanaway

State
WA

Zip Code
98387

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.207887

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCCARRON, WILLIAM, J., ,

Mailing Address 436 Lamb Road

City
Carbondale

State
IL

Zip Code
62902

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
SEC THERAPY AIDE I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.82

Date of Receipt

11 / 05 / 2018

Transaction ID : SA11AI.208272

Amount of Each Receipt this Period

31.26

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCCLAIN, MELVINAI, D., ,

Mailing Address 3948 Wilson Ridge Court

City
Ellenwood

State
GA

Zip Code
30294

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
REGIONAL FIELD ADMINISTRATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

857.23

Date of Receipt

10 / 31 / 2018

Transaction ID : SA11AI.206366

Amount of Each Receipt this Period

37.72

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

89.98

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 799 OF 1411

(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. MCCLAIN, MELVINAI, D., ,

Mailing Address 3948 Wilson Ridge Court

City
Ellenwood

State
GA

Zip Code
30294

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

REGIONAL FIELD ADMINISTRATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

894.95

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206744

Amount of Each Receipt this Period

37.72

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCCLURE, MICAH, J., ,

Mailing Address 1607 Sandalwood Drive

City

Sandy Springs

State

OH

Zip Code

30350

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

847.26

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206368

Amount of Each Receipt this Period

37.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCCLURE, MICAH, J., ,

Mailing Address 1607 Sandalwood Drive

City

Sandy Springs

State

OH

Zip Code

30350

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

884.26

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206746

Amount of Each Receipt this Period

37.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

111.72

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 800 OF 1411

(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. MCCORMACK, TERENCE, , ,

Mailing Address 6221 Oak Tree Drive N

City
LorainState
OHZip Code
44053FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
SAFETY & HEALTH COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	6		2	0	1	8

Transaction ID : SA11AI.209083

Amount of Each Receipt this Period

23.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCCORMACK, TERENCE, , ,

Mailing Address 6221 Oak Tree Drive N

City
LorainState
OHZip Code
44053FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
SAFETY & HEALTH COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

453.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	9		2	0	1	8

Transaction ID : SA11AI.209714

Amount of Each Receipt this Period

23.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCCORMACK, TERENCE, , ,

Mailing Address 6221 Oak Tree Drive N

City
LorainState
OHZip Code
44053FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
SAFETY & HEALTH COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

476.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	3		2	0	1	8

Transaction ID : SA11AI.210366

Amount of Each Receipt this Period

23.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

69.00

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 801 OF 1411

(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. MCCORMICK, MALINDA, E., ,

Mailing Address 5251 Greenville Drive

City

Bryans Road

State

MD

Zip Code

20616

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

OFFICE ASSISTANT III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

548.38

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206369

Amount of Each Receipt this Period

27.01

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCCORMICK, MALINDA, E., ,

Mailing Address 5251 Greenville Drive

City

Bryans Road

State

MD

Zip Code

20616

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

OFFICE ASSISTANT III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.39

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206747

Amount of Each Receipt this Period

27.01

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCCORMICK, MARTIN, L., ,

Mailing Address G-4610 Beecher Road

City

Flint

State

MI

Zip Code

48532

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MI CN 25/GENESEE COUNTY

Occupation (for Individual)

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
10 / 18 / 2018

Transaction ID : SA11AI.211357

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

64.02

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 802 OF 1411

(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. MCCORMICK, MARTIN, L., ,

Mailing Address G-4610 Beecher Road

City
Flint

State
MI

Zip Code
48532

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MI CN 25/GENESEE COUNTY

Occupation (for Individual)

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
10 / 22 / 2018

Transaction ID : SA11AI.211364

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCCORMICK, MARTIN, L., ,

Mailing Address G-4610 Beecher Road

City
Flint

State
MI

Zip Code
48532

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MI CN 25/GENESEE COUNTY

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.211365

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCCORMICK, MARTIN, L., ,

Mailing Address G-4610 Beecher Road

City
Flint

State
MI

Zip Code
48532

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MI CN 25/GENESEE COUNTY

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2018

Transaction ID : SA11AI.211389

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 803 OF 1411

(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. MCCORMICK, SUZANNE, , ,

Mailing Address 32 Harvest Lane

City
West Grove

State
PA

Zip Code
19390

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME PA CN 13

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

862.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207097

Amount of Each Receipt this Period

78.42

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCCracken, THOMAS, F., ,

Mailing Address 343 East Main Street

City
Mahaffey

State
PA

Zip Code
15757-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)

STATE SUPERVISOR DISTR II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.207098

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCCrarry, LEVAlle, D., ,

Mailing Address 909 Glenn Avenue

City
Wshngtn Ct Hs

State
OH

Zip Code
43160

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 ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209084

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

148.42

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 804 OF 1411
(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. MCCRARY, LEVALLE, D., ,

Mailing Address 909 Glenn Avenue

City

Wshngtn Ct Hs

State

OH

Zip Code

43160

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 ▼

230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.209715

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCCRARY, LEVALLE, D., ,

Mailing Address 909 Glenn Avenue

City

Wshngtn Ct Hs

State

OH

Zip Code

43160

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 ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210367

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCCULLOUGH, MARK, D., ,Mailing Address 300 S Biscayne Blvd.
#3708

City

Miami

State

FL

Zip Code

33131

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

STRATEGIC COMMUNICATIONS SPE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2018

Transaction ID : SA11AI.206750

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 805 OF 1411

(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. MCDEVITT, BRIAN, O., ,

Mailing Address 700 6th Street

City
BettendorfState
IDZip Code
52722FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IA CN 61

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.22

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	18	2018

Transaction ID : SA11AI.211846

Amount of Each Receipt this Period

20.82

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCDEVITT, BRIAN, O., ,

Mailing Address 700 6th Street

City
BettendorfState
IDZip Code
52722FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IA CN 61

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.04

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.211912

Amount of Each Receipt this Period

20.82

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCDONALD, ANDREA, D., ,

Mailing Address 227 Rocky Ridge Blvd.

City
DouglasvilleState
GAZip Code
30314FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

FIELD OFFICE ASSISTANT I

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

434.31

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206373

Amount of Each Receipt this Period

22.62

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

64.26

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 806 OF 1411

(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. MCDONALD, ANDREA, D., ,

Mailing Address 227 Rocky Ridge Blvd.

City
DouglasvilleState
GAZip Code
30314FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

FIELD OFFICE ASSISTANT I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.93

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2018			

Transaction ID : SA11AI.206751

Amount of Each Receipt this Period

22.62

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCDONALD, JAMES, E., ,

Mailing Address P.O. Box 48

City
VermilionState
OHZip Code
44089FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2018			

Transaction ID : SA11AI.209085

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCDONALD, JAMES, E., ,

Mailing Address P.O. Box 48

City
VermilionState
OHZip Code
44089FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			09			2018			

Transaction ID : SA11AI.209716

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

42.62

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 807 OF 1411

(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. MCDONALD, JAMES, E., ,

Mailing Address P.O. Box 48

City
VermilionState
OHZip Code
44089FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210368

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCDONALD, JEFFREY, E., ,

Mailing Address 18870 250th Street

City
Park RapidsState
MNZip Code
56470FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MNOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	01	2018

Transaction ID : SA11AI.211729

Amount of Each Receipt this Period

24.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCDONNELL, BRIAN, P., ,

Mailing Address 56 Chestnut Lane

City
NiskayunaState
NYZip Code
12309FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
ASSOCIATE DIRECTOR, POLITICAL A

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1495.60

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206374

Amount of Each Receipt this Period

72.28

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

106.28

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 808 OF 1411

(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. MCDONNELL, BRIAN, P., ,

Mailing Address 56 Chestnut Lane

City
NiskayunaState
NYZip Code
12309FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ASSOCIATE DIRECTOR, POLITICAL /

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1567.88

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		1	5			2	0	1	8		

Transaction ID : SA11AI.206752

Amount of Each Receipt this Period

72.28

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCDOWELL, FAYE, E., ,

Mailing Address 6557 Scioto Darby Road

City
HilliardState
OHZip Code
43026FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

ACCOUNTANT/EXAMINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	3			2	0	1	8		

Transaction ID : SA11AI.210369

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCELROY, MELISSA, A., ,Mailing Address 48 Kitty Drive
Lot 5City
RavenswoodState
WVZip Code
26164FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

FIELD OFFICE ASSISTANT I

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

291.49

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			3	1			2	0	1	8		

Transaction ID : SA11AI.206375

Amount of Each Receipt this Period

14.78

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

95.56

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 809 OF 1411

(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. MCELROY, MELISSA, A., ,Mailing Address 48 Kitty Drive
Lot 5City
RavenswoodState
WVZip Code
26164FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

FIELD OFFICE ASSISTANT I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.27

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2018

Transaction ID : SA11AI.206753

Amount of Each Receipt this Period

14.78

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCENTEE, GERALD, , ,Mailing Address 800 25th Street NW
Apt. #406City
WashingtonState
DCZip Code
20037-2207FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L/STATE STREET

Occupation (for Individual)

RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1817.03

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2018

Transaction ID : SA11AI.206754

Amount of Each Receipt this Period

143.27

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCENTEE, GERALD, , ,Mailing Address 800 25th Street NW
Apt. #406City
WashingtonState
DCZip Code
20037-2207FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L/STATE STREET

Occupation (for Individual)

RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1917.03

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

Transaction ID : SA11AI.206906

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

258.05

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 810 OF 1411

(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. MCEWEN, JERI, , ,

Mailing Address 4031 Executive Park Drive

City
HarrisburgState
PAZip Code
17111-1599FEC 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 ▼

605.82

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	8			2	0	1	8		

Transaction ID : SA11AI.207099

Amount of Each Receipt this Period

52.68

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCGEE, THERESA, , ,

Mailing Address P.O. Box 123

City
Oak HarborState
WAZip Code
98277FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28/COMM COLLEGE

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	8		

Transaction ID : SA11AI.207458

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCGEE, THERESA, , ,

Mailing Address P.O. Box 123

City
Oak HarborState
WAZip Code
98277FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28/COMM COLLEGE

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	9			2	0	1	8		

Transaction ID : SA11AI.207660

Amount of Each Receipt this Period

12.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

76.68

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 811 OF 1411
(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. MCGEE, THERESA, , ,

Mailing Address P.O. Box 123

City
Oak HarborState
WAZip Code
98277FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/COMM COLLEGEOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	6			2	0	1	8		

Transaction ID : SA11AI.207888

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCGHAN, KATHY, S., ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	8		

Transaction ID : SA11AI.207459

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCGHAN, KATHY, S., ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	9			2	0	1	8		

Transaction ID : SA11AI.207661

Amount of Each Receipt this Period

11.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

34.00

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 812 OF 1411

(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. MCGHAN, KATHY, S., ,

Mailing Address 1212 Jefferson Street SE

 City
 Olympia

 State
 WA

 Zip Code
 98501

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.207889

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCGINNIS, CATHERINE, A., ,

Mailing Address 4320 NW Second Avenue

 City
 Des Moines

 State
 IA

 Zip Code
 50313

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME IA CN 61/DOCS

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.211847

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCGINNIS, CATHERINE, A., ,

Mailing Address 4320 NW Second Avenue

 City
 Des Moines

 State
 IA

 Zip Code
 50313

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME IA CN 61/DOCS

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.211913

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 813 OF 1411

(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. MCGRANE, ARTHUR, R., , Jr.

Mailing Address 78 10th Street E.

Unit 707

City

St. Paul

State

MN

Zip Code

55101

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MN CN 5/MRA

Occupation (for Individual)

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 Y
11 / 01 / 2018

Transaction ID : SA11AI.211730

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCHUGH, KYLE, J., ,

Mailing Address 305 Charles Street

City

Rockville

State

MD

Zip Code

20850

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

NETWORK ANALYST II

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

487.89

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206376

Amount of Each Receipt this Period

32.68

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCHUGH, KYLE, J., ,

Mailing Address 305 Charles Street

City

Rockville

State

MD

Zip Code

20850

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

NETWORK ANALYST II

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

520.57

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206755

Amount of Each Receipt this Period

32.68

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.36

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 814 OF 1411

(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. MCINTYRE, TONYA, L., ,

Mailing Address 2307 Roslyn Avenue

City

District Heights

State

MD

Zip Code

20747

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ADMINISTRATIVE ASSISTANT I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206377

Amount of Each Receipt this Period

21.74

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCINTYRE, TONYA, L., ,

Mailing Address 2307 Roslyn Avenue

City

District Heights

State

MD

Zip Code

20747

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ADMINISTRATIVE ASSISTANT I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206756

Amount of Each Receipt this Period

21.74

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCKAY, KENNETH, P., ,

Mailing Address 343 Pennsylvania Avenue

City

Mc Donald

State

OH

Zip Code

44437

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 ▼

207.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209718

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

52.48

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 815 OF 1411

(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. MCKAY, KENNETH, P., ,

Mailing Address 343 Pennsylvania Avenue

City

Mc Donald

State

OH

Zip Code

44437

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 ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210370

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCKINNEY, CHERYL, L., ,

Mailing Address 230 E 65th Street

City

Tacoma

State

WA

Zip Code

98404

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 25 / 2018

Transaction ID : SA11AI.207460

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCKINNEY, CHERYL, L., ,

Mailing Address 230 E 65th Street

City

Tacoma

State

WA

Zip Code

98404

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207662

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

35.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 816 OF 1411

(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. MCKINNEY, CHERYL, L., ,

Mailing Address 230 E 65th Street

 City
 Tacoma

 State
 WA

 Zip Code
 98404

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			26			2018			

Transaction ID : SA11AI.207891

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCLAIN, RYAN, A., ,

Mailing Address 1113 W Sterns

 City
 Temperance

 State
 MI

 Zip Code
 48182

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME INT'L

 Occupation (for Individual)
 FIELD DATA COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2018			

Transaction ID : SA11AI.206378

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCLAIN, RYAN, A., ,

Mailing Address 1113 W Sterns

 City
 Temperance

 State
 MI

 Zip Code
 48182

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME INT'L

 Occupation (for Individual)
 FIELD DATA COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2018			

Transaction ID : SA11AI.206757

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 817 OF 1411

(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. MC LELLAN, JOHN, , ,

Mailing Address 210 MLK, Jr. Blvd.
Rm 425

City
Madison

State
WI

Zip Code
53703

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WI CN 32/DANE COUNTY

Occupation (for Individual)
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
10 / 24 / 2018

Transaction ID : SA11AI.211420

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MC LELLAN, JOHN, , ,

Mailing Address 210 MLK, Jr. Blvd.
Rm 425

City
Madison

State
WI

Zip Code
53703

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WI CN 32/DANE COUNTY

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211421

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MC LELLAN, JOHN, , ,

Mailing Address 210 MLK, Jr. Blvd.
Rm 425

City
Madison

State
WI

Zip Code
53703

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WI CN 32/DANE COUNTY

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 16 / 2018

Transaction ID : SA11AI.211444

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 818 OF 1411

(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. MCMILLIAN, JANAI, N., ,Mailing Address 1222 Stone Ridge Drive
Apt. BCity
ColumbusState
OHZip Code
43213FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
FINANCIAL ASSOCIATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	9			2	0	1	8		

Transaction ID : SA11AI.209719

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCMILLIAN, JANAI, N., ,Mailing Address 1222 Stone Ridge Drive
Apt. BCity
ColumbusState
OHZip Code
43213FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
FINANCIAL ASSOCIATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	3			2	0	1	8		

Transaction ID : SA11AI.210371

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCNAMARA, NEIL, , ,

Mailing Address 836 S Lombard Avenue

City
Oak ParkState
ILZip Code
60304FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	5			2	0	1	8		

Transaction ID : SA11AI.208274

Amount of Each Receipt this Period

70.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

88.00

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 819 OF 1411

(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. MCROBIE, OWEN, D., ,

Mailing Address 61571 Groves Road

City
Belmont

State
OH

Zip Code
43718

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 SERGEANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210372

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCTURNER, AUSTIN, G., ,

Mailing Address 75 West Street

City
Lucasville

State
OH

Zip Code
45648

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 ▼

286.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209090

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCTURNER, AUSTIN, G., ,

Mailing Address 75 West Street

City
Lucasville

State
OH

Zip Code
45648

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 ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209721

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

34.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 820 OF 1411

(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. MCTURNER, AUSTIN, G., ,

Mailing Address 75 West Street

City
Lucasville

State
OH

Zip Code
45648

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 ▼

312.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210373

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCTURNER, BRENDA, S., ,

Mailing Address 61 Clairdon Drive

City
Lucasville

State
OH

Zip Code
45648

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
SECRETARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

452.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209091

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCTURNER, BRENDA, S., ,

Mailing Address 61 Clairdon Drive

City
Lucasville

State
OH

Zip Code
45648

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
SECRETARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

472.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209722

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

53.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 821 OF 1411

(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. MCTURNER, BRENDA, S., ,

Mailing Address 61 Clairdon Drive

City
Lucasville

State
OH

Zip Code
45648

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
SECRETARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

492.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210374

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCWREATH, TRACI, J., ,

Mailing Address 2206 Deerfield Drive

City
Ashtabula

State
OH

Zip Code
44004

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/WARREN OH RH

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.210823

Amount of Each Receipt this Period

9.62

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCWREATH, TRACI, J., ,

Mailing Address 2206 Deerfield Drive

City
Ashtabula

State
OH

Zip Code
44004

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/WARREN OH RH

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 13 / 2018

Transaction ID : SA11AI.210824

Amount of Each Receipt this Period

9.62

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

39.24

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 822 OF 1411

(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. MCWREATH, TRACI, J., ,

Mailing Address 2206 Deerfield Drive

City
Ashtabula

State
OH

Zip Code
44004

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/WARREN OH RH

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.26

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.210919

Amount of Each Receipt this Period

9.62

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MEADE, RANDY, E., ,

Mailing Address 3157 Schell Drive

City
Marion

State
OH

Zip Code
43302

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209092

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MEADE, RANDY, E., ,

Mailing Address 3157 Schell Drive

City
Marion

State
OH

Zip Code
43302

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

253.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209723

Amount of Each Receipt this Period

11.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

31.62

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 823 OF 1411

(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. MEADE, RANDY, E., ,

Mailing Address 3157 Schell Drive

City
MarionState
OHZip Code
43302FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210375

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MECKLING, SALLY, , ,

Mailing Address 390 Worthington Road

City

Westerville

State
OHZip Code
43082FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

809.52

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	06	2018

Transaction ID : SA11AI.210376

Amount of Each Receipt this Period

67.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MEDINA, YOLANDA, , ,Mailing Address 8 Ralph Street
Apt. 1

City

Bergenfield

State
NJZip Code
07621-0000FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
DIRECTOR, EDUCATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2013.57

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206379

Amount of Each Receipt this Period

100.65

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

179.11

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 824 OF 1411

(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. MEDINA, YOLANDA, , ,

Mailing Address 8 Ralph Street
Apt. 1

City
Bergenfield

State
NJ

Zip Code
07621-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
DIRECTOR, EDUCATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2114.22

Date of Receipt

11 / 15 / 2018

Transaction ID : SA11AI.206758

Amount of Each Receipt this Period

100.65

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MEEK, DAMON, K., ,

Mailing Address 5518 Brook Point Road

City
Toledo

State
OH

Zip Code
43611

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 ▼

207.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209724

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MEEK, DAMON, K., ,

Mailing Address 5518 Brook Point Road

City
Toledo

State
OH

Zip Code
43611

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 ▼

216.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210377

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

118.65

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 825 OF 1411

(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. MEEKER, MARY, FORDHAM, ,

Mailing Address 13275 Amblerwood Drive

City
Manassas

State
VA

Zip Code
20112

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
LABOR ECONOMIST III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1054.64

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206380

Amount of Each Receipt this Period

53.05

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MEEKER, MARY, FORDHAM, ,

Mailing Address 13275 Amblerwood Drive

City
Manassas

State
VA

Zip Code
20112

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
LABOR ECONOMIST III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1107.69

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206759

Amount of Each Receipt this Period

53.05

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MEEKS, KIMBERLY, L., ,

Mailing Address 432 Blackhawk Street

City
Aurora

State
IL

Zip Code
60506

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
OFFICE ADMINISTRATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

833.40

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208275

Amount of Each Receipt this Period

83.34

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

189.44

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 826 OF 1411

(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. MEIER, MARK, A., ,

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 (for Individual)

AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

218.82

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		18		2018

Transaction ID : SA11AI.211848

Amount of Each Receipt this Period

10.42

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MEIER, MARK, A., ,

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 (for Individual)

AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

229.24

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		26		2018

Transaction ID : SA11AI.211914

Amount of Each Receipt this Period

10.42

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MELENDEZ-LAVANDERO, MANUEL, , ,Mailing Address 1690 Lexington Avenue
4th Floor

City

New York

State

NY

Zip Code

10029

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

FIELD EDUCATION COORDINATOR II

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

721.96

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		31		2018

Transaction ID : SA11AI.206382

Amount of Each Receipt this Period

36.41

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

57.25

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 827 OF 1411

(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. MELENDEZ-LAVANDERO, MANUEL, , ,Mailing Address 1690 Lexington Avenue
4th FloorCity
New YorkState
NYZip Code
10029FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

FIELD EDUCATION COORDINATOR II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

758.37

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2018

Transaction ID : SA11AI.206761

Amount of Each Receipt this Period

36.41

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MENK, LORI, B., ,

Mailing Address 117 W. Middle Street

City

Burbank

State
OHZip Code
44214FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

HIGHWAY TECHNICIAN II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2018

Transaction ID : SA11AI.209094

Amount of Each Receipt this Period

13.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MENK, LORI, B., ,

Mailing Address 117 W. Middle Street

City

Burbank

State
OHZip Code
44214FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

HIGHWAY TECHNICIAN II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

310.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.209725

Amount of Each Receipt this Period

13.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

63.41

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 828 OF 1411

(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. MENK, LORI, B., ,

Mailing Address 117 W. Middle Street

City
BurbankState
OHZip Code
44214FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
HIGHWAY TECHNICIAN II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210378

Amount of Each Receipt this Period

13.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MEREDITH, MICHAEL, , ,

Mailing Address 1415 Ivy Hill Road

City
CockeysvilleState
MDZip Code
21030FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MD CN 3Occupation (for Individual)
ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.88

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	07	2018

Transaction ID : SA11AI.211324

Amount of Each Receipt this Period

60.22

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MERO, GENEVIEVE N, , ,

Mailing Address 41-678 Inoaole Street

City
WaimanaloState
HIZip Code
96795FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 152Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	01	2018

Transaction ID : SA11AI.211008

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

93.72

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 829 OF 1411

(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. MERRILL, MARTHA, J., ,

Mailing Address 1433 W Belle Plaine Avenue

City
Chicago

State
IL

Zip Code
60613

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

791.62

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208276

Amount of Each Receipt this Period

79.16

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MERSHON, PAMELA, F., ,

Mailing Address 6994 Shaulis Drive

City

Reynoldsburg

State

OH

Zip Code

43068

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ODJFS EXTERNAL AUDIT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209095

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MERSHON, PAMELA, F., ,

Mailing Address 6994 Shaulis Drive

City

Reynoldsburg

State

OH

Zip Code

43068

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ODJFS EXTERNAL AUDIT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

276.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209726

Amount of Each Receipt this Period

12.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

103.16

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 830 OF 1411

(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. MERSHON, PAMELA, F., ,

Mailing Address 6994 Shaulis Drive

City

Reynoldsburg

State

OH

Zip Code

43068

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

ODJFS EXTERNAL AUDIT

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210379

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MESSINA, J. MICHAEL, , ,

Mailing Address 752 Silver Spring Avenue

City

Silver Spring

State

MD

Zip Code

20910

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

LABOR ECONOMIST III

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1592.60

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206383

Amount of Each Receipt this Period

78.38

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MESSINA, J. MICHAEL, , ,

Mailing Address 752 Silver Spring Avenue

City

Silver Spring

State

MD

Zip Code

20910

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

LABOR ECONOMIST III

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

1670.98

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206762

Amount of Each Receipt this Period

78.38

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

168.76

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 831 OF 1411

(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. METCALFE, MARGARET JEAN, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
10 / 25 / 2018

Transaction ID : SA11AI.207461

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. METCALFE, MARGARET JEAN, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207663

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. METCALFE, MARGARET JEAN, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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 Y
11 / 26 / 2018

Transaction ID : SA11AI.207892

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 832 OF 1411

(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. METHENA, JULIE, L., ,

Mailing Address 153 S Grove Street

City

Bowling Green

State

OH

Zip Code

43402

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209096

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. METHENA, JULIE, L., ,

Mailing Address 153 S Grove Street

City

Bowling Green

State

OH

Zip Code

43402

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209727

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. METHENA, JULIE, L., ,

Mailing Address 153 S Grove Street

City

Bowling Green

State

OH

Zip Code

43402

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

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 Y
11 / 23 / 2018

Transaction ID : SA11AI.210380

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 833 OF 1411

(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. METTLER, KENNETH, J ., ,

Mailing Address 24671 Woltz Road

City
RockbridgeState
OHZip Code
43149FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ENVIRONMENTAL SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209728

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. METTLER, KENNETH, J ., ,

Mailing Address 24671 Woltz Road

City
RockbridgeState
OHZip Code
43149FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ENVIRONMENTAL SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210381

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. METTY, MICHAEL, B., ,

Mailing Address 5304 Jasmine Lane

City
HillardState
OHZip Code
43026FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.209098

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

28.00

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 834 OF 1411

(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. METTY, MICHAEL, B., ,

Mailing Address 5304 Jasmine Lane

City
Hillard

State
OH

Zip Code
43026

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 ▼

230.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209729

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. METTY, MICHAEL, B., ,

Mailing Address 5304 Jasmine Lane

City
Hillard

State
OH

Zip Code
43026

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 ▼

240.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210382

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MEYER, CHRISTINE, E., ,

Mailing Address P.O. Box 16

City
Palmer

State
IL

Zip Code
62556

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
SOCIAL SERVICES CARE REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 05 / 2018

Transaction ID : SA11AI.208277

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

50.00

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 835 OF 1411

(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. MICHALEC, JOHN, , ,

Mailing Address 1544 N. Hickory

City

Owosso

State

MI

Zip Code

48867

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MI CN 25

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211342

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MICHALEC, JOHN, , ,

Mailing Address 1544 N. Hickory

City

Owosso

State

MI

Zip Code

48867

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MI CN 25

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 20 / 2018

Transaction ID : SA11AI.211390

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MICHEL, PAUL, E., ,

Mailing Address 120 W Sugar Street

City

Leipsic

State

OH

Zip Code

45856

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

LOCKSMITH

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210383

Amount of Each Receipt this Period

8.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

50.50

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 836 OF 1411

(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. MIKITA, KRISTEN, L., ,

Mailing Address 163 Beeson Court

City
Galloway

State
OH

Zip Code
43119

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
SOFTWARE DEVELOPMENT TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

407.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209100

Amount of Each Receipt this Period

18.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MIKITA, KRISTEN, L., ,

Mailing Address 163 Beeson Court

City
Galloway

State
OH

Zip Code
43119

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
SOFTWARE DEVELOPMENT TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209731

Amount of Each Receipt this Period

18.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MIKITA, KRISTEN, L., ,

Mailing Address 163 Beeson Court

City
Galloway

State
OH

Zip Code
43119

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
SOFTWARE DEVELOPMENT TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

444.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210384

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)..... ►

55.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 837 OF 1411

(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. MIKULAK, SAMUEL, B, ,

Mailing Address 157 Cottage Street

 City
 Honesdale

 State
 PA

 Zip Code
 18431

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME PA CN 13/STATE OF PA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	D D	Y Y Y Y
10	31	2018

Transaction ID : SA11AI.207100

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MILKS, BARBARA, J., ,

Mailing Address 8269 Piney Orch

 City
 Blacklick

 State
 OH

 Zip Code
 43004

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 FISCAL SPECIALIST II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	D D	Y Y Y Y
10	26	2018

Transaction ID : SA11AI.209101

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MILKS, BARBARA, J., ,

Mailing Address 8269 Piney Orch

 City
 Blacklick

 State
 OH

 Zip Code
 43004

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 FISCAL SPECIALIST II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	D D	Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209732

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 838 OF 1411

(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. MILKS, BARBARA, J., ,

Mailing Address 8269 Piney Orch

City
Blacklick

State
OH

Zip Code
43004

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
FISCAL SPECIALIST II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210385

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MILLER, ARTHUR, , ,

Mailing Address 911 White Avenue

City
Cloquet

State
MN

Zip Code
55720

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211731

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MILLER, BRET, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 25 / 2018

Transaction ID : SA11AI.207462

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 839 OF 1411

(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. MILLER, BRET, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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 Y
11 / 09 / 2018

Transaction ID : SA11AI.207664

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MILLER, BRET, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207893

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MILLER, BRIAN, D., ,

Mailing Address 325 Avalon Drive

City
Mansfield

State
OH

Zip Code
44906

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 ▼

359.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209102

Amount of Each Receipt this Period

18.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

58.50

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 840 OF 1411

(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. MILLER, BRIAN, D., ,

Mailing Address 325 Avalon Drive

City
Mansfield

State
OH

Zip Code
44906

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 ▼

377.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209733

Amount of Each Receipt this Period

18.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MILLER, BRIAN, D., ,

Mailing Address 325 Avalon Drive

City
Mansfield

State
OH

Zip Code
44906

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 ▼

396.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210386

Amount of Each Receipt this Period

18.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MILLER, JEREMIAH, , ,

Mailing Address 4 Heidi Lane

City
Millbrae

State
CA

Zip Code
94030

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA CN 57

Occupation (for Individual)
BUSINESS AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 24 / 2018

Transaction ID : SA11AI.211239

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

57.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 841 OF 1411

(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. MILLER, MORGAN, , ,

Mailing Address 4320 NW Second Avenue

City
Des MoinesState
IAZip Code
50313FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

448.40

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	18	2018

Transaction ID : SA11AI.211873

Amount of Each Receipt this Period

44.84

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MILLER, MORGAN, , ,

Mailing Address 4320 NW Second Avenue

City
Des MoinesState
IAZip Code
50313FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

493.24

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	06	2018

Transaction ID : SA11AI.211915

Amount of Each Receipt this Period

44.84

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MILLER, ONDREA, L., ,

Mailing Address 84 Daimler Drive

City
Capitol HeightsState
MDZip Code
20743FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
SOFTWARE TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206384

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

99.68

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 842 OF 1411

(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. MILLER, ONDREA, L., ,

Mailing Address 84 Daimler Drive

City

Capitol Heights

State

MD

Zip Code

20743

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

SOFTWARE TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206763

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MILLER, PATTI, J., ,

Mailing Address 100 Rosslyn Avenue

City

Columbus

State

OH

Zip Code

43214

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210387

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MILLER, SCOTT, D., ,

Mailing Address 2056 W Hutchinson
2nd Fl.

City

Chicago

State

IL

Zip Code

60618

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31

Occupation (for Individual)

LEGAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

856.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208278

Amount of Each Receipt this Period

87.40

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.90

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 843 OF 1411

(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. MILLER, STACEY, A., ,

Mailing Address 603 North Eighth Avenue

City

Altoona

State

PA

Zip Code

16601

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME PA CN 13/NSP/LOCAL 691

Occupation (for Individual)

BEHAVIORAL HEALTH TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207101

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MILNER, RONALD, , ,

Mailing Address 6178 Shelba Drive

City

Galloway

State

OH

Zip Code

43119

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 ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210388

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MILTON, CHRISTOPHER, , ,

Mailing Address 6819 Middlegate Lane

City

Glen Carbon

State

IL

Zip Code

62034

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208279

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

88.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 844 OF 1411

(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. MILTON, KAREN, L., ,

Mailing Address 8616 Golden Given Road E.

City
Tacoma

State
WA

Zip Code
98445

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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 Y
10 / 25 / 2018

Transaction ID : SA11AI.207463

Amount of Each Receipt this Period

12.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MILTON, KAREN, L., ,

Mailing Address 8616 Golden Given Road E.

City
Tacoma

State
WA

Zip Code
98445

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207665

Amount of Each Receipt this Period

12.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MILTON, KAREN, L., ,

Mailing Address 8616 Golden Given Road E.

City
Tacoma

State
WA

Zip Code
98445

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207895

Amount of Each Receipt this Period

12.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

37.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 845 OF 1411

(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. MINICH, JOSHUA, N., ,

Mailing Address 6013 Route 66

City

Fairmount City

State

PA

Zip Code

16224

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)

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
10 / 31 / 2018

Transaction ID : SA11AI.207102

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MINOR, DAVID, S ., ,

Mailing Address 731 Homeway Drive

City

New Lebanon

State

OH

Zip Code

45345

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 ▼

211.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209736

Amount of Each Receipt this Period

12.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MINOR, DAVID, S ., ,

Mailing Address 731 Homeway Drive

City

New Lebanon

State

OH

Zip Code

45345

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 ▼

224.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210389

Amount of Each Receipt this Period

12.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

45.00

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 846 OF 1411

(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. MIRANDA, MARC, , ,

Mailing Address 3428 Logan Street

City

La Verne

State

CA

Zip Code

91750

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME CA LOC 1902

Occupation (for Individual)

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
10 / 19 / 2018

Transaction ID : SA11AI.211064

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MIRANDA, MARC, , ,

Mailing Address 3428 Logan Street

City

La Verne

State

CA

Zip Code

91750

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME CA LOC 1902

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211085

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MIRANDA, MARC, , ,

Mailing Address 3428 Logan Street

City

La Verne

State

CA

Zip Code

91750

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME CA LOC 1902

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 20 / 2018

Transaction ID : SA11AI.211106

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 847 OF 1411

(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. MITCHELL, HAROLD, F., ,

Mailing Address 3999 Kensingwood Drive

City
Columbus

State
OH

Zip Code
43230

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH CN 8

Occupation (for Individual)

ASSISTANT ORGANIZING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1303.16

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210920

Amount of Each Receipt this Period

100.96

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MITCHELL, TAMMY, E., ,

Mailing Address 11334 King George Drive

City

Silver Spring

State

MD

Zip Code

20902

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

OFFICE ASSISTANT III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.40

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206385

Amount of Each Receipt this Period

10.42

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MITCHELL, TAMMY, E., ,

Mailing Address 11334 King George Drive

City

Silver Spring

State

MD

Zip Code

20902

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

OFFICE ASSISTANT III

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

218.82

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206764

Amount of Each Receipt this Period

10.42

☐ Memo Item

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 848 OF 1411

(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. MITCHELL, TINA, L., ,

Mailing Address 9242 State Route 7 S

 City
 Gallipolis

 State
 OH

 Zip Code
 45631

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 LICENSED PRACTICAL NURSE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210390

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MITTONS, BRIDGETTE, J., ,

Mailing Address 89 Lawrence Lane

 City
 Matteson

 State
 IL

 Zip Code
 60443

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME IL CN 31/STATE OF IL

 Occupation (for Individual)
 PUBLIC AID INVESTIGATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

Transaction ID : SA11AI.208280

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MITTONS, STEPHEN, C., ,

Mailing Address 89 Lawrence Lane

 City
 Matteson

 State
 IL

 Zip Code
 60443

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME IL CN 31/STATE OF IL

 Occupation (for Individual)
 CHILD PROTECTION SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

Transaction ID : SA11AI.208281

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 849 OF 1411

(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. MOATS, AMBER, F., ,

Mailing Address 107 Spahr P.O. Box 95

City
Mount Union

State
IA

Zip Code
52644

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

491.60

Date of Receipt

10 / 18 / 2018

Transaction ID : SA11AI.211874

Amount of Each Receipt this Period

41.66

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOATS, AMBER, F., ,

Mailing Address 107 Spahr P.O. Box 95

City
Mount Union

State
IA

Zip Code
52644

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

533.26

Date of Receipt

11 / 06 / 2018

Transaction ID : SA11AI.211916

Amount of Each Receipt this Period

41.66

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOATS, JASON, D., ,

Mailing Address 107 Spahr P.O. Box 95

City
Mount Union

State
IA

Zip Code
52644

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

441.00

Date of Receipt

10 / 18 / 2018

Transaction ID : SA11AI.211849

Amount of Each Receipt this Period

21.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

104.32

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 850 OF 1411

(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. MOATS, JASON, D., ,

Mailing Address 107 Spahr P.O. Box 95

City
Mount Union

State
IA

Zip Code
52644

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.211917

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOCHEL, JEREMY, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 09 / 2018

Transaction ID : SA11AI.207666

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOCHEL, JEREMY, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 26 / 2018

Transaction ID : SA11AI.207896

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

41.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 851 OF 1411

(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. MOCK, JAMES, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 09 / 2018

Transaction ID : SA11AI.207667

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOCK, JAMES, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 26 / 2018

Transaction ID : SA11AI.207897

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOCK, JEANNETTE, C., ,

Mailing Address 160 Patchway Road

City
Duncansville

State
PA

Zip Code
16635

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 ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207103

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 852 OF 1411
(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. MODLIN, ALEATHEA, H., ,

Mailing Address 506 7th Avenue NE

City
BrainerdState
MNZip Code
56401FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MNOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	01	2018

Transaction ID : SA11AI.211732

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOEN, DEBORAH, , ,

Mailing Address 1508 309th Avenue NW

City
CambridgeState
MNZip Code
55008-6939FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MNOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	01	2018

Transaction ID : SA11AI.211733

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOFFITT, ROBERT, , ,

Mailing Address 2059 L Avenue

City
WoodardState
IAZip Code
50276FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/STATE OF IAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	18	2018

Transaction ID : SA11AI.211850

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

57.00

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 853 OF 1411

(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. MOFFITT, ROBERT, , ,

Mailing Address 2059 L Avenue

City
Woodard

State
IA

Zip Code
50276

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.211918

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOLINICH, DENISE, M., ,

Mailing Address 1124 Roberts Street

City
Nanty Glo

State
PA

Zip Code
15943

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)
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
10 / 31 / 2018

Transaction ID : SA11AI.207104

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOMBERGER, KAREN, , ,

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 (for Individual)
AFSCME PA CN 13

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1169.30

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207105

Amount of Each Receipt this Period

106.30

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

141.30

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 854 OF 1411

(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. MONAHAN, TRACY, L., ,

Mailing Address 33 Randolph Street
#10

City
Abington

State
MA

Zip Code
02351-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

FIELD EDUCATION COORDINATOR II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1096.22

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206386

Amount of Each Receipt this Period

56.11

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MONAHAN, TRACY, L., ,

Mailing Address 33 Randolph Street
#10

City
Abington

State
MA

Zip Code
02351-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

FIELD EDUCATION COORDINATOR I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1152.33

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206765

Amount of Each Receipt this Period

56.11

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MONCREASE, RICHAWN, C., ,

Mailing Address 5500 Old Coble Street

City
Canal Winchester

State
OH

Zip Code
43110

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH CN 8

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

679.80

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210921

Amount of Each Receipt this Period

64.72

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

176.94

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 855 OF 1411

(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. MONROE, ETHEL, A., ,

Mailing Address 1930 W Loyola Avenue

City
Chiacgo

State
IL

Zip Code
60626

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
CHIEF CLERK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.40

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208282

Amount of Each Receipt this Period

20.84

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MONTAIE, MICHELE, R., ,

Mailing Address 1510 Brown Street

City

Middletown

State

OH

Zip Code

45044

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 ▼

286.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209107

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MONTAIE, MICHELE, R., ,

Mailing Address 1510 Brown Street

City

Middletown

State

OH

Zip Code

45044

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 ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209738

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

46.84

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 856 OF 1411

(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. MONTAIE, MICHELE, R., ,

Mailing Address 1510 Brown Street

City
Middletown

State
OH

Zip Code
45044

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 ▼

312.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210391

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MONTEVERDE, DELMA, , ,

Mailing Address 23900 59th Place W.

City
Mountlake Terra

State
WA

Zip Code
98043

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
10 / 25 / 2018

Transaction ID : SA11AI.207466

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MONTEVERDE, DELMA, , ,

Mailing Address 23900 59th Place W.

City
Mountlake Terra

State
WA

Zip Code
98043

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207668

Amount of Each Receipt this Period

10.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

34.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 857 OF 1411

(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. MONTEVERDE, DELMA, , ,

Mailing Address 23900 59th Place W.

City

Mountlake Terra

State

WA

Zip Code

98043

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)

STAFF 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
11 / 26 / 2018

Transaction ID : SA11AI.207898

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MONTGOMERY, JAY, A., ,

Mailing Address 787 Green Hills Road

City

Birdsboro

State

PA

Zip Code

19508

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME PA CN 13/NSP/LOCAL 2763

Occupation (for Individual)

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
11 / 08 / 2018

Transaction ID : SA11AI.207106

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MONTGOMERY, JULIE, C., ,

Mailing Address 2765 Initial Place

City

Enumclaw

State

WA

Zip Code

98022

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

323.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 25 / 2018

Transaction ID : SA11AI.207467

Amount of Each Receipt this Period

17.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

37.50

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MONTGOMERY, JULIE, C., ,

Mailing Address 2765 Initial Place

City
Enumclaw

State
WA

Zip Code
98022

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207669

Amount of Each Receipt this Period

17.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MONTGOMERY, JULIE, C., ,

Mailing Address 2765 Initial Place

City
Enumclaw

State
WA

Zip Code
98022

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207899

Amount of Each Receipt this Period

17.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOODY, TREVA, L., ,

Mailing Address 433 Pleasure Creek Drive

City
Minneapolis

State
MN

Zip Code
55434

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
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
11 / 01 / 2018

Transaction ID : SA11AI.211734

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

54.00

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MOORE, DENNIS, L., ,

Mailing Address 4735 E B Avenue

City
Plainwell

State
MI

Zip Code
49080

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MI CN 25/LOCAL 1668

Occupation (for Individual)
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
10 / 29 / 2018

Transaction ID : SA11AI.211366

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOORE, DENNIS, L., ,

Mailing Address 4735 E B Avenue

City
Plainwell

State
MI

Zip Code
49080

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MI CN 25/LOCAL 1668

Occupation (for Individual)
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
11 / 07 / 2018

Transaction ID : SA11AI.211391

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOORE, DOUGLAS, , ,

Mailing Address 10176 Foothill Court

City
Spring Valley

State
CA

Zip Code
91977

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 3930

Occupation (for Individual)
EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1071.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206158

Amount of Each Receipt this Period

14.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

34.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 860 OF 1411

(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. MOORE, DOUGLAS, , ,

Mailing Address 10176 Foothill Court

City
Spring Valley

State
CA

Zip Code
91977

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 3930

Occupation (for Individual)
EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1155.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211159

Amount of Each Receipt this Period

84.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOORE, JULIANE, , ,

Mailing Address 304 North Wenas Avenue

City
Selah

State
WA

Zip Code
98942

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 25 / 2018

Transaction ID : SA11AI.207468

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOORE, JULIANE, , ,

Mailing Address 304 North Wenas Avenue

City
Selah

State
WA

Zip Code
98942

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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 Y
11 / 09 / 2018

Transaction ID : SA11AI.207670

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

124.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 861 OF 1411

(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. MOORE, JULIANE, , ,

Mailing Address 304 North Wenas Avenue

City
Selah

State
WA

Zip Code
98942

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207900

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOORE, KEISHA, F ., ,

Mailing Address 2829 W 84th Place

City
Chicago

State
IL

Zip Code
60652

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
CORRECTIONS SENIOR PD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208283

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOORE, SCOTT, A., ,

Mailing Address 5 Crestview Drive

City
Paris

State
IL

Zip Code
61944

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
CORRECTIONS PAROLE REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208284

Amount of Each Receipt this Period

48.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

89.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 862 OF 1411

(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. **MOORE, THYRION, C., ,**
 Mailing Address 4401 76th Avenue W.
 Apt. 10

 City
 University Place

 State
 WA

 Zip Code
 98466

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	25	2018

Transaction ID : SA11AI.207469

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **MOORE, THYRION, C., ,**
 Mailing Address 4401 76th Avenue W.
 Apt. 10

 City
 University Place

 State
 WA

 Zip Code
 98466

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.207671

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **MOORE, THYRION, C., ,**
 Mailing Address 4401 76th Avenue W.
 Apt. 10

 City
 University Place

 State
 WA

 Zip Code
 98466

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	26	2018

Transaction ID : SA11AI.207901

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 863 OF 1411

(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. MOORMAN, MARTHA, J., ,

Mailing Address 5954 Camerino Street

City
LakewoodState
CAZip Code
90713FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
FIELD OFFICE ASSISTANT I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

467.04

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206387

Amount of Each Receipt this Period

23.49

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOORMAN, MARTHA, J., ,

Mailing Address 5954 Camerino Street

City
LakewoodState
CAZip Code
90713FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
FIELD OFFICE ASSISTANT I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.53

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	15	2018

Transaction ID : SA11AI.206766

Amount of Each Receipt this Period

23.49

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MORALES, MARK, E., ,Mailing Address 367 s Beechgrove Road
Apt. ICity
WilmingtonState
OHZip Code
45177FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION SERGEANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.209108

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

56.98

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 864 OF 1411

(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. MORALES, MARK, E., ,

Mailing Address 367 s Beechgrove Road
Apt. I

City
Wilmington

State
OH

Zip Code
45177

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 SERGEANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209739

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MORALES, MARK, E., ,

Mailing Address 367 s Beechgrove Road
Apt. I

City
Wilmington

State
OH

Zip Code
45177

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 SERGEANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210393

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MORALES, MICHAEL, E., ,

Mailing Address 750 SW 138th Avenue
Apt. F-114

City
Pembroke Pines

State
FL

Zip Code
33027

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
DATA & TARGETING SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

665.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206388

Amount of Each Receipt this Period

31.01

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

51.01

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 865 OF 1411

(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. MORALES, MICHAEL, E., ,

Mailing Address 750 SW 138th Avenue
Apt. F-114

City
Pembroke Pines

State
FL

Zip Code
33027

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
DATA & TARGETING SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

696.09

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206767

Amount of Each Receipt this Period

31.01

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MORAN, PATRICK, G., ,

Mailing Address 415 U Street NW

City
Washington

State
DC

Zip Code
20001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MD CN 3

Occupation (for Individual)
AREA ORGANIZING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211325

Amount of Each Receipt this Period

114.16

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MORAN, THOMAS, P., ,

Mailing Address P.O. Box 302

City
Hillsboro

State
OH

Zip Code
45133

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HIGHWAY MAINTENANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209109

Amount of Each Receipt this Period

14.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

159.17

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 866 OF 1411

(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. MORAN, THOMAS, P., ,

Mailing Address P.O. Box 302

City
Hillsboro

State
OH

Zip Code
45133

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HIGHWAY MAINTENANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209740

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MORAN, THOMAS, P., ,

Mailing Address P.O. Box 302

City
Hillsboro

State
OH

Zip Code
45133

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HIGHWAY MAINTENANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210394

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOREHEAD, ROSEMARIE, , ,

Mailing Address 97 Woodland Avenue

City
Waynesburg

State
PA

Zip Code
15370

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/NSP/LOCAL 324

Occupation (for Individual)
POLITICAL ACTION REPRESENTATIV

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

11 / 08 / 2018

Transaction ID : SA11AI.207107

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

38.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 867 OF 1411

(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. MOREHOUSE, MORIAH, , ,

Mailing Address 1209 Binning Road

City
Milford

State
OH

Zip Code
45150

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209110

Amount of Each Receipt this Period

14.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOREHOUSE, MORIAH, , ,

Mailing Address 1209 Binning Road

City
Milford

State
OH

Zip Code
45150

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209741

Amount of Each Receipt this Period

14.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOREHOUSE, MORIAH, , ,

Mailing Address 1209 Binning Road

City
Milford

State
OH

Zip Code
45150

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210395

Amount of Each Receipt this Period

14.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

43.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 868 OF 1411

(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. MORGAN, KATRINA, A., ,

Mailing Address 254 Parkland Blvd.

City
Vermilion

State
OH

Zip Code
44089

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HOSPITAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209111

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MORGAN, KATRINA, A., ,

Mailing Address 254 Parkland Blvd.

City
Vermilion

State
OH

Zip Code
44089

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HOSPITAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209742

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MORGAN, KATRINA, A., ,

Mailing Address 254 Parkland Blvd.

City
Vermilion

State
OH

Zip Code
44089

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HOSPITAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210396

Amount of Each Receipt this Period

14.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

42.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 869 OF 1411

(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. MORGER, MATTHEW, L., ,

Mailing Address 1905 S Washington

City
TiltonState
ILZip Code
61832FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
CORRECTIONAL OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.56

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208285

Amount of Each Receipt this Period

38.48

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MORRIS, CAROL, R., ,

Mailing Address 15609 S Kimbark Avenue

City

South Holland

State

IL

Zip Code

60473

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
PUBLIC SERVICE ADMIN.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.60

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208286

Amount of Each Receipt this Period

41.66

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MORRIS, FAITH, D., ,

Mailing Address 296 Churchmans Road

City

New Castle

State

DE

Zip Code

19720

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME DE CN 81Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

245.53

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	19	2018

Transaction ID : SA11AI.211264

Amount of Each Receipt this Period

26.18

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

106.32

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 870 OF 1411

(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. MORRIS, FAITH, D., ,

Mailing Address 296 Churchmans Road

City
New Castle

State
DE

Zip Code
19720

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME DE CN 81

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.71

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2018

Transaction ID : SA11AI.211271

Amount of Each Receipt this Period

26.18

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MORRIS, LAURA, B., ,

Mailing Address 996 S Champion Avenue

City
Columbus

State
OH

Zip Code
43206

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
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
10 / 26 / 2018

Transaction ID : SA11AI.209112

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MORRIS, LAURA, B., ,

Mailing Address 996 S Champion Avenue

City
Columbus

State
OH

Zip Code
43206

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209743

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

46.18

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 871 OF 1411

(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. MORRIS, LAURA, B., ,

Mailing Address 996 S Champion Avenue

 City
 Columbus

 State
 OH

 Zip Code
 43206

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.210397

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MORRIS, SARAI, N., ,

Mailing Address 3833 Halley Terrace SE

 City
 Washington

 State
 DC

 Zip Code
 20032

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME INT'L

 Occupation (for Individual)
 ACCOUNTANT I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.206391

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MORRIS, SARAI, N., ,

Mailing Address 3833 Halley Terrace SE

 City
 Washington

 State
 DC

 Zip Code
 20032

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME INT'L

 Occupation (for Individual)
 ACCOUNTANT I

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.206770

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 872 OF 1411

(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. MORROW, KATHRYN, , ,

Mailing Address 4031 Executive Park Drive

 City
 Harrisburg

 State
 PA

 Zip Code
 17111

 FEC ID number of contributing
 federal political committee.

Name of Employer (for Individual)

AFSCME PA CN 13

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			08			2018			

Transaction ID : SA11AI.207108

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MORTON, RONNIE, L., ,

Mailing Address 125 Pfeiffer Avenue

 City
 Clyde

 State
 OH

 Zip Code
 43410

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 CORRECTION SERGEANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2018			

Transaction ID : SA11AI.209113

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MORTON, RONNIE, L., ,

Mailing Address 125 Pfeiffer Avenue

 City
 Clyde

 State
 OH

 Zip Code
 43410

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 CORRECTION SERGEANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			09			2018			

Transaction ID : SA11AI.209744

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 873 OF 1411

(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. MORTON, RONNIE, L., ,

Mailing Address 125 Pfeiffer Avenue

City
Clyde

State
OH

Zip Code
43410

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 SERGEANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210398

Amount of Each Receipt this Period

13.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOSBY, RODNEY, D., ,

Mailing Address 1107 Waterford Drive

City

District Heights

State
MD

Zip Code
20747

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ASSISTANT DIRECTOR, ACCOUNTIN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1051.10

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206392

Amount of Each Receipt this Period

50.51

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOSBY, RODNEY, D., ,

Mailing Address 1107 Waterford Drive

City

District Heights

State
MD

Zip Code
20747

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ASSISTANT DIRECTOR, ACCOUNTIN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1101.61

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206771

Amount of Each Receipt this Period

50.51

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

114.52

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 874 OF 1411

(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. MOSELEY, LATASHIA, N., ,

Mailing Address 1879 Biscayne Bay Circle

 City
 Jacksonville

 State
 FL

 Zip Code
 32218

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME INT'L

 Occupation (for Individual)
 ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			3	1			2	0	1	8		

Transaction ID : SA11AI.206393

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOSELEY, LATASHIA, N., ,

Mailing Address 1879 Biscayne Bay Circle

 City
 Jacksonville

 State
 FL

 Zip Code
 32218

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME INT'L

 Occupation (for Individual)
 ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			1	5			2	0	1	8		

Transaction ID : SA11AI.206772

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOSLEY, TYRONE, , ,

Mailing Address 1212 Jefferson Street SE

 City
 Olympia

 State
 WA

 Zip Code
 98501

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	8		

Transaction ID : SA11AI.207470

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 875 OF 1411

(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. MOSLEY, TYRONE, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.207672

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOSLEY, TYRONE, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.00

Date of Receipt

11 / 26 / 2018

Transaction ID : SA11AI.207902

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOTTAYAW, SCOTT, A., ,

Mailing Address 407 Shepard Road

City
Mansfield

State
OH

Zip Code
44907

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 ▼

204.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210399

Amount of Each Receipt this Period

8.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 876 OF 1411

(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. MOWERY, SHAWN, M., ,

Mailing Address 561 W Ashton Avenue

City
LimaState
OHZip Code
45801FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
MAINTENANCE REPAIR TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209746

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOWERY, SHAWN, M., ,

Mailing Address 561 W Ashton Avenue

City
LimaState
OHZip Code
45801FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
MAINTENANCE REPAIR TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210400

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOY-SANTOS, KATHERINE, , ,Mailing Address 190 W. Ostend Street
Suite 101City
BaltimoreState
MDZip Code
21230FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MD CN 3Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

226.34

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	07	2018

Transaction ID : SA11AI.211326

Amount of Each Receipt this Period

58.34

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

76.34

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 877 OF 1411

(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. MUEGGLER, FORREST, S., ,

Mailing Address P.O. Box 1388

City
Richland

State
WA

Zip Code
99352

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207673

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MUEGGLER, FORREST, S., ,

Mailing Address P.O. Box 1388

City
Richland

State
WA

Zip Code
99352

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207903

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MULDER, ZACHARIAH, J., ,

Mailing Address 1121 1/2 Cumming Avenue

City
Superior

State
WI

Zip Code
54880

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211735

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 878 OF 1411

(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. MULHALL, ROBYN, L., ,

Mailing Address 6800 N High Street

City
Worthington

State
OH

Zip Code
43085

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/METROHEALTH

Occupation (for Individual)
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
10 / 23 / 2018

Transaction ID : SA11AI.210825

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MULHALL, ROBYN, L., ,

Mailing Address 6800 N High Street

City
Worthington

State
OH

Zip Code
43085

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/METROHEALTH

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210922

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MULLEN, STEVEN, C., ,

Mailing Address 544 Clermont Drive

City
Harrisburg

State
PA

Zip Code
17112

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13

Occupation (for Individual)
TRADES LABORER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2160.39

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207109

Amount of Each Receipt this Period

187.86

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

217.86

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 879 OF 1411

(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. MUNOZ, FLORENTINO, J., ,

Mailing Address 1340 E 31st Street

City
Oakland

State
CA

Zip Code
94602

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA CN 57

Occupation (for Individual)
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
11 / 02 / 2018

Transaction ID : SA11AI.211240

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MUNTZ, TRACY, J., ,

Mailing Address 3220 Ray Nash Drive NW

City
Gig Harbor

State
WA

Zip Code
98335

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

740.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 25 / 2018

Transaction ID : SA11AI.207472

Amount of Each Receipt this Period

37.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MUNTZ, TRACY, J., ,

Mailing Address 3220 Ray Nash Drive NW

City
Gig Harbor

State
WA

Zip Code
98335

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

777.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207674

Amount of Each Receipt this Period

37.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

94.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 880 OF 1411

(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. MUNTZ, TRACY, J, ,

Mailing Address 3220 Ray Nash Drive NW

City

Gig Harbor

State

WA

Zip Code

98335

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

814.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207904

Amount of Each Receipt this Period

37.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MURPHY, MARK, , ,

Mailing Address 2133 Farrington Avenue

City

Alexandria

State

VA

Zip Code

22303

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

LABOR ECONOMIST III

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1201.40

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206394

Amount of Each Receipt this Period

57.82

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MURPHY, MARK, , ,

Mailing Address 2133 Farrington Avenue

City

Alexandria

State

VA

Zip Code

22303

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

LABOR ECONOMIST III

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

1259.22

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206773

Amount of Each Receipt this Period

57.82

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

152.64

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 881 OF 1411

(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. MURPHY, SEAN, M., ,

Mailing Address 1129 Annabelle Street

City

Mc Donald

State

OH

Zip Code

44437

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

THERAPUTIC PROGRAM TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209116

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MURPHY, SEAN, M., ,

Mailing Address 1129 Annabelle Street

City

Mc Donald

State

OH

Zip Code

44437

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

THERAPUTIC PROGRAM TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209747

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MURPHY, SEAN, M., ,

Mailing Address 1129 Annabelle Street

City

Mc Donald

State

OH

Zip Code

44437

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

THERAPUTIC PROGRAM TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210401

Amount of Each Receipt this Period

14.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

42.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 882 OF 1411

(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. MURPHY, THERESA, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 25 / 2018

Transaction ID : SA11AI.207473

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MURPHY, THERESA, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 09 / 2018

Transaction ID : SA11AI.207675

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MURPHY, THERESA, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

283.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207905

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

39.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 883 OF 1411

(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. MURRAY, CARLA, R., ,

Mailing Address 15542 Oliver

City
Cairo

State
IL

Zip Code
62914

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

INTERNAL SECURITY INSPECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.82

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208287

Amount of Each Receipt this Period

31.26

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MURRAY, EVONNE, , ,

Mailing Address 3403 N. Broom Place
#B6

City
Wilmington

State
DE

Zip Code
19802

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME DE CN 81

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.62

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 19 / 2018

Transaction ID : SA11AI.211265

Amount of Each Receipt this Period

28.94

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MURRAY, EVONNE, , ,

Mailing Address 3403 N. Broom Place
#B6

City
Wilmington

State
DE

Zip Code
19802

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME DE CN 81

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

304.56

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2018

Transaction ID : SA11AI.211272

Amount of Each Receipt this Period

28.94

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

89.14

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 884 OF 1411

(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. MURRAY, THOMAS, , ,

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 (for Individual)

AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2018

Transaction ID : SA11AI.211736

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MUSHROW, MARIA, , ,

Mailing Address 3929 SE Conifer Park Drive

City

Port Orchard

State

WA

Zip Code

98366

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
FOOD SERVICE CLERK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.207676

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MUSHROW, MARIA, , ,

Mailing Address 3929 SE Conifer Park Drive

City

Port Orchard

State

WA

Zip Code

98366

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
FOOD SERVICE CLERK

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2018

Transaction ID : SA11AI.207906

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

40.00

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 885 OF 1411

(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. MUSTIN, BENITA, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
10 / 25 / 2018

Transaction ID : SA11AI.207475

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MUSTIN, BENITA, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207677

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MUSTIN, BENITA, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF 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
11 / 26 / 2018

Transaction ID : SA11AI.207907

Amount of Each Receipt this Period

10.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

31.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 886 OF 1411

(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. MYERS, BARBARA, A., ,

Mailing Address 101 Northfield Drive

City

Middle Point

State

OH

Zip Code

45863

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

LICENSED PRACTICAL NURSE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209748

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MYERS, BARBARA, A., ,

Mailing Address 101 Northfield Drive

City

Middle Point

State

OH

Zip Code

45863

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

LICENSED PRACTICAL NURSE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210402

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MYERS, CAMERON, C., ,

Mailing Address 1851 State Route 56

City

London

State

OH

Zip Code

43140

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 ▼

209.00

Date of Receipt

10 / 26 / 2018

Transaction ID : SA11AI.209118

Amount of Each Receipt this Period

9.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

27.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 887 OF 1411

(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. MYERS, CAMERON, C., ,

Mailing Address 1851 State Route 56

City
London

State
OH

Zip Code
43140

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 ▼

218.50

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209749

Amount of Each Receipt this Period

9.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MYERS, CAMERON, C., ,

Mailing Address 1851 State Route 56

City
London

State
OH

Zip Code
43140

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 ▼

228.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210403

Amount of Each Receipt this Period

9.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MYERS, JENNIFER, L., ,

Mailing Address 608 Skyline Road

City
Mansfield

State
OH

Zip Code
44905

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 ▼

204.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210404

Amount of Each Receipt this Period

8.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

27.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 888 OF 1411

(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. MYERS, KENNETH, E., ,

Mailing Address 101 Northfield Drive

City

Middle Point

State

OH

Zip Code

45863

FEC ID number of contributing
federal political committee.

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

SAFETY & HEALTH COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.209751

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MYERS, KENNETH, E., ,

Mailing Address 101 Northfield Drive

City

Middle Point

State

OH

Zip Code

45863

FEC ID number of contributing
federal political committee.

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

SAFETY & HEALTH COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.210405

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MYERS, KIMBERLY, A., ,

Mailing Address 5300 South Main Street

City

Westover

State

PA

Zip Code

16692

FEC ID number of contributing
federal political committee.

Name of Employer (for Individual)

AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.207110

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 889 OF 1411

(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. MYERS, RAMONE, , , Mailing Address 1212 Jefferson Street SE			Date of Receipt 10 / 25 / 2018 Transaction ID : SA11AI.207476 Amount of Each Receipt this Period 17.00 ☐ Memo Item		
City Olympia State WA Zip Code 98501	FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA		Occupation (for Individual) STAFF REPRESENTATIVE			
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Aggregate Year-to-Date ▼ 340.00			
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MYERS, RAMONE, , , Mailing Address 1212 Jefferson Street SE			Date of Receipt 11 / 09 / 2018 Transaction ID : SA11AI.207678 Amount of Each Receipt this Period 17.00 ☐ Memo Item		
City Olympia State WA Zip Code 98501	FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA		Occupation (for Individual) STAFF REPRESENTATIVE			
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Aggregate Year-to-Date ▼ 357.00			
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MYERS, RAMONE, , , Mailing Address 1212 Jefferson Street SE			Date of Receipt 11 / 26 / 2018 Transaction ID : SA11AI.207908 Amount of Each Receipt this Period 17.00 ☐ Memo Item		
City Olympia State WA Zip Code 98501	FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA		Occupation (for Individual) STAFF REPRESENTATIVE			
Receipt For: ☐ Primary ☐ General ☐ Other (specify)		Aggregate Year-to-Date ▼ 374.00			
SUBTOTAL of Receipts This Page (optional).....▶			51.00		
TOTAL This Period (last page this line number only).....▶					

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 890 OF 1411

(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. MYLES, DONJUDIS, J., ,

Mailing Address 1471 Devonthurst Drive

City
ColumbusState
OHZip Code
43232FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
PROVIDER RELATIONS REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				23				2018					

Transaction ID : SA11AI.210406

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NAAUAO, KANAIOKUHOME, K., ,

Mailing Address 1374 Mailani Street

City
HiloState
HIZip Code
96720FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 152Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				01				2018					

Transaction ID : SA11AI.211009

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NAIAD, PHYLLIS, S., ,

Mailing Address 13304 58th Drive NE

City
MarysvilleState
WAZip Code
98271FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28Occupation (for Individual)
COUNCIL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

574.86

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				14				2018					

Transaction ID : SA11AI.207909

Amount of Each Receipt this Period

52.26

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

81.76

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 891 OF 1411

(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. NAKANELUA, DAYTON, M.,

Mailing Address 47-647 Hui Kelu Street

City
Kaneohe

State
HI

Zip Code
96744

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 646

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

966.74

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2018

Transaction ID : SA11AI.211288

Amount of Each Receipt this Period

83.34

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NAKASHIMA, DIANE, A.,

Mailing Address 1374 Mailani Street

City
Hilo

State
HI

Zip Code
96720

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 152

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.35

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211010

Amount of Each Receipt this Period

20.85

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NAPIHAA, JASON, ,

Mailing Address P.O. Box 5223

City
Hilo

State
HI

Zip Code
96720

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 646

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

229.13

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.211289

Amount of Each Receipt this Period

20.83

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.02

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 892 OF 1411

(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. NEELY, MADELINE, C., ,

Mailing Address P.O. Box 501

City

Kaaawa

State

HI

Zip Code

96730

FEC ID number of contributing federal political committee.

Name of Employer (for Individual)

AFSCME HI RET CHPT 152

Occupation (for Individual)

RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2018

Transaction ID : SA11AI.211044

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NEELY, NORMAN, , ,

Mailing Address 108 Iliad Drive

City

Tinley Park

State

IL

Zip Code

60477

FEC ID number of contributing federal political committee.

Name of Employer (for Individual)

AFSCME IL CN 31

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

Transaction ID : SA11AI.208288

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NEFF, ALISON, , ,

Mailing Address 1212 Jefferson Street SE

City

Olympia

State

WA

Zip Code

98501

FEC ID number of contributing federal political committee.

Name of Employer (for Individual)

AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.207679

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 893 OF 1411

(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. NEFF, ALISON, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 26 / 2018

Transaction ID : SA11AI.207910

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NELEN, ALEXA, D., ,

Mailing Address 2011 Hawks Landing Drive

City
Orlando

State
FL

Zip Code
32820

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ORGANIZER IN TRAINING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1336.20

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206396

Amount of Each Receipt this Period

65.35

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NELEN, ALEXA, D., ,

Mailing Address 2011 Hawks Landing Drive

City
Orlando

State
FL

Zip Code
32820

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ORGANIZER IN TRAINING

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1401.55

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206775

Amount of Each Receipt this Period

65.35

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

140.70

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 894 OF 1411

(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. NELSON, ANTHONY, D., ,

Mailing Address 1204 17th Street SW

City
WillmarState
MNZip Code
56201FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MNOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	01	2018

Transaction ID : SA11AI.211737

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NELSON, CATHERINE, M., ,

Mailing Address 3606 SE Sunrise Drive

City
CamasState
WAZip Code
98607FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.207680

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NELSON, CATHERINE, M., ,

Mailing Address 3606 SE Sunrise Drive

City
CamasState
WAZip Code
98607FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	26	2018

Transaction ID : SA11AI.207911

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

40.00

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 895 OF 1411

(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. NELSON, CHELSA, A., ,

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 (for Individual)

AFSCME MN CN 5/CN14

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

975.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211738

Amount of Each Receipt this Period

125.86

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NEMIRE, JESSICA, M., ,

Mailing Address 1955 Thornbrook Trail

City

Toledo

State

OH

Zip Code

43611

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209753

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NEMIRE, JESSICA, M., ,

Mailing Address 1955 Thornbrook Trail

City

Toledo

State

OH

Zip Code

43611

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210407

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

143.86

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 896 OF 1411

(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. NESTLER, RENEE, , ,

Mailing Address 27 Fetzner Court

Unit 1

City

Bloomington

State

IL

Zip Code

61704

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

762.79

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208289

Amount of Each Receipt this Period

76.28

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NETH, JOHN, A ., ,

Mailing Address 709 Daytona Drive

City

Lima

State

OH

Zip Code

45801

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 ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210408

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NETTLES, ALVIN, R., ,

Mailing Address 865 Cairns Road

City

Mansfield

State

OH

Zip Code

44903

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 ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210409

Amount of Each Receipt this Period

8.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

93.28

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 897 OF 1411

(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. NEW, CHARLENE, M., ,

Mailing Address 4349 28th Avenue S

City
MinneapolisState
MNZip Code
55406FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MNOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	01	2018

Transaction ID : SA11AI.211739

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NEWBURN, GARVEL, A., ,Mailing Address 9941 Good Luck Road
#204City
LanhamState
MDZip Code
20706FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
ASSISTANT PROGRAMMER ANALYS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.83

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206397

Amount of Each Receipt this Period

31.86

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NEWBURN, GARVEL, A., ,Mailing Address 9941 Good Luck Road
#204City
LanhamState
MDZip Code
20706FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
ASSISTANT PROGRAMMER ANALYS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

707.69

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	15	2018

Transaction ID : SA11AI.206776

Amount of Each Receipt this Period

31.86

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

83.72

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 898 OF 1411

(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. NEWELL, JEFFREY, L., ,

Mailing Address 1237 Cranberry Lane

City

Coatesville

State

PA

Zip Code

19320

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.207111

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NEWLAND, GRIFFIN, B., ,

Mailing Address 1201 Christopher Street

City

Thief River Fall

State

MN

Zip Code

56701

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	01	2018

Transaction ID : SA11AI.211740

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NEWMAN, BRENDA, , ,

Mailing Address 1021 Ralph Street

City

Lansing

State

MI

Zip Code

48906

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MI CN 25

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.50

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	07	2018

Transaction ID : SA11AI.211343

Amount of Each Receipt this Period

10.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

50.50

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 899 OF 1411

(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. NEWMAN, BRENDA, , ,

Mailing Address 1021 Ralph Street

 City
 Lansing

 State
 MI

 Zip Code
 48906

 FEC ID number of contributing
 federal political committee.

 C

 Name of Employer (for Individual)
 AFSCME MI CN 25

 Occupation (for Individual)
 STAFF 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 Y
 11 / 20 / 2018

Transaction ID : SA11AI.211392

Amount of Each Receipt this Period

 10.50
☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NEWMAN, MICHAEL, , ,

Mailing Address 4031 N. Hermitage Avenue

 City
 Chicago

 State
 IL

 Zip Code
 60613

 FEC ID number of contributing
 federal political committee.

 C

 Name of Employer (for Individual)
 AFSCME IL CN 31

 Occupation (for Individual)
 ASSOCIATE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

 1165.62

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2018

Transaction ID : SA11AI.208290

Amount of Each Receipt this Period

 116.56
☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NEWTON, DALE, A., ,

Mailing Address G-4610 Beecher Road

 City
 Flint

 State
 MI

 Zip Code
 48532

 FEC ID number of contributing
 federal political committee.

 C

 Name of Employer (for Individual)
 AFSCME MI CN 25/GENESEE COUNTY

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

 210.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 10 / 18 / 2018

Transaction ID : SA11AI.211358

Amount of Each Receipt this Period

 10.00
☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

 137.06
TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 900 OF 1411

(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. NEWTON, DALE, A., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address G-4610 Beecher Road <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: 1px solid black; padding: 2px;">City Flint</td> <td style="width: 15%; border: 1px solid black; padding: 2px;">State MI</td> <td style="width: 52%; border: 1px solid black; padding: 2px;">Zip Code 48532</td> </tr> </table> FEC ID number of contributing federal political committee. C <table style="width: 100%; border: none;"> <tr> <td style="width: 40%; border: none;"> Name of Employer (for Individual) AFSCME MI CN 25/GENESEE COUNTY </td> <td style="width: 60%; border: none;"> Occupation (for Individual) STAFF REPRESENTATIVE </td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼			City Flint	State MI	Zip Code 48532	Name of Employer (for Individual) AFSCME MI CN 25/GENESEE COUNTY	Occupation (for Individual) STAFF REPRESENTATIVE	Date of Receipt M M / D D / Y Y Y Y Y 10 / 22 / 2018 Transaction ID : SA11AI.211367 Amount of Each Receipt this Period 10.00 ☐ Memo Item
City Flint	State MI	Zip Code 48532						
Name of Employer (for Individual) AFSCME MI CN 25/GENESEE COUNTY	Occupation (for Individual) STAFF REPRESENTATIVE							
B. NEWTON, DALE, A., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address G-4610 Beecher Road <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: 1px solid black; padding: 2px;">City Flint</td> <td style="width: 15%; border: 1px solid black; padding: 2px;">State MI</td> <td style="width: 52%; border: 1px solid black; padding: 2px;">Zip Code 48532</td> </tr> </table> FEC ID number of contributing federal political committee. C <table style="width: 100%; border: none;"> <tr> <td style="width: 40%; border: none;"> Name of Employer (for Individual) AFSCME MI CN 25/GENESEE COUNTY </td> <td style="width: 60%; border: none;"> Occupation (for Individual) STAFF REPRESENTATIVE </td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼			City Flint	State MI	Zip Code 48532	Name of Employer (for Individual) AFSCME MI CN 25/GENESEE COUNTY	Occupation (for Individual) STAFF REPRESENTATIVE	Date of Receipt M M / D D / Y Y Y Y Y 10 / 31 / 2018 Transaction ID : SA11AI.211368 Amount of Each Receipt this Period 10.00 ☐ Memo Item
City Flint	State MI	Zip Code 48532						
Name of Employer (for Individual) AFSCME MI CN 25/GENESEE COUNTY	Occupation (for Individual) STAFF REPRESENTATIVE							
C. NEWTON, DALE, A., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address G-4610 Beecher Road <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: 1px solid black; padding: 2px;">City Flint</td> <td style="width: 15%; border: 1px solid black; padding: 2px;">State MI</td> <td style="width: 52%; border: 1px solid black; padding: 2px;">Zip Code 48532</td> </tr> </table> FEC ID number of contributing federal political committee. C <table style="width: 100%; border: none;"> <tr> <td style="width: 40%; border: none;"> Name of Employer (for Individual) AFSCME MI CN 25/GENESEE COUNTY </td> <td style="width: 60%; border: none;"> Occupation (for Individual) STAFF REPRESENTATIVE </td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼			City Flint	State MI	Zip Code 48532	Name of Employer (for Individual) AFSCME MI CN 25/GENESEE COUNTY	Occupation (for Individual) STAFF REPRESENTATIVE	Date of Receipt M M / D D / Y Y Y Y Y 11 / 14 / 2018 Transaction ID : SA11AI.211393 Amount of Each Receipt this Period 10.00 ☐ Memo Item
City Flint	State MI	Zip Code 48532						
Name of Employer (for Individual) AFSCME MI CN 25/GENESEE COUNTY	Occupation (for Individual) STAFF REPRESENTATIVE							
SUBTOTAL of Receipts This Page (optional)..... ▶			 30.00					
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 901 OF 1411

(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. NEYSSEN, RICHARD, J., ,

Mailing Address 405 - 15th Avenue N

City
Saint Cloud

State
MN

Zip Code
56303

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
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
11 / 01 / 2018

Transaction ID : SA11AI.211741

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NGUYEN, THUAN, A., ,

Mailing Address 3516 Cranmer Mews

City
Woodbridge

State
VA

Zip Code
22193

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ASSISTANT AUDITOR I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

598.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206399

Amount of Each Receipt this Period

30.44

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NGUYEN, THUAN, A., ,

Mailing Address 3516 Cranmer Mews

City
Woodbridge

State
VA

Zip Code
22193

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ASSISTANT AUDITOR I

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

628.44

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206778

Amount of Each Receipt this Period

30.44

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.88

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 902 OF 1411

(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. NICHOL, MARY, L., ,

Mailing Address 1117 Meridian Street N.
Apt. E3

City Puyallup State WA Zip Code 98371

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 25 / 2018

Transaction ID : SA11AI.207479

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NICHOL, MARY, L., ,

Mailing Address 1117 Meridian Street N.
Apt. E3

City Puyallup State WA Zip Code 98371

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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 Y
11 / 09 / 2018

Transaction ID : SA11AI.207681

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NICHOL, MARY, L., ,

Mailing Address 1117 Meridian Street N.
Apt. E3

City Puyallup State WA Zip Code 98371

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207912

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 903 OF 1411

(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. NICHOLS, SHERYL, L., ,

Mailing Address 2410 East Fifth Street

City
DaytonState
OHZip Code
45403FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH CN 8

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

465.61

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	06	2018

Transaction ID : SA11AI.210923

Amount of Each Receipt this Period

43.44

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NICHOLS, WILLIAM, J., ,

Mailing Address 6570 Ponderosa Drive

City
ErieState
PAZip Code
16509FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME PA CN 13/NSP/LOCAL 2666

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	08	2018

Transaction ID : SA11AI.207112

Amount of Each Receipt this Period

16.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NIDA, LEROY, J., ,

Mailing Address 208 F Place

City
KalonaState
IAZip Code
52247FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	18	2018

Transaction ID : SA11AI.211851

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

79.44

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 904 OF 1411
(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. NIDA, LEROY, J., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 208 F Place City Kalona State IA Zip Code 52247 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME IA CN 61/STATE OF IA Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 440.00			Date of Receipt M M / D D / Y Y Y Y Y 10 / 26 / 2018 Transaction ID : SA11AI.211919 Amount of Each Receipt this Period 20.00 ☐ Memo Item
B. NIGHTWINE, NICHOLAS, A., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 6655 Jackson Road Unit 214 City Ann Arbor State MI Zip Code 48103 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME MI CN 25/ANN ARBOR Occupation (for Individual) 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 10 / 18 / 2018 Transaction ID : SA11AI.211359 Amount of Each Receipt this Period 10.00 ☐ Memo Item
C. NIGHTWINE, NICHOLAS, A., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 6655 Jackson Road Unit 214 City Ann Arbor State MI Zip Code 48103 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME MI CN 25/ANN ARBOR Occupation (for Individual) 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 10 / 22 / 2018 Transaction ID : SA11AI.211369 Amount of Each Receipt this Period 10.00 ☐ Memo Item
SUBTOTAL of Receipts This Page (optional)..... ▶			40.00
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 905 OF 1411

(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. NIGHTWINE, NICHOLAS, A., ,

Mailing Address 6655 Jackson Road
Unit 214

City
Ann Arbor

State
MI

Zip Code
48103

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MI CN 25/ANN ARBOR

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.211370

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NIGHTWINE, NICHOLAS, A., ,

Mailing Address 6655 Jackson Road
Unit 214

City
Ann Arbor

State
MI

Zip Code
48103

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MI CN 25/ANN ARBOR

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 19 / 2018

Transaction ID : SA11AI.211394

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NIPPOLDT, JULIE, A., ,

Mailing Address 8817 92nd Street S.

City
Cottage Grove

State
MN

Zip Code
55016

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

219.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211742

Amount of Each Receipt this Period

22.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

42.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 906 OF 1411

(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. NITTA, GARRY, Y, ,

Mailing Address 251 Nalani Street

City
Makawao

State
HI

Zip Code
96768

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 152

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211011

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NIXON, RODERICK, , ,

Mailing Address 3491 E. Curry Street

City
Long Beach

State
CA

Zip Code
90805

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 1902

Occupation (for Individual)
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
10 / 19 / 2018

Transaction ID : SA11AI.211065

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NIXON, RODERICK, , ,

Mailing Address 3491 E. Curry Street

City
Long Beach

State
CA

Zip Code
90805

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 1902

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211086

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 907 OF 1411

(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. NIXON, RODERICK, , ,

Mailing Address 3491 E. Curry Street

City

Long Beach

State

CA

Zip Code

90805

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME CA LOC 1902

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	0			2	0	1	8		

Transaction ID : SA11AI.211107

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NIXON, TERRY, , ,

Mailing Address 19409 NE Dawn Dr

City

Yacolt

State

WA

Zip Code

98675

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28

Occupation (for Individual)

TRADES HELPER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	8		

Transaction ID : SA11AI.207480

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NIXON, TERRY, , ,

Mailing Address 19409 NE Dawn Dr

City

Yacolt

State

WA

Zip Code

98675

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28

Occupation (for Individual)

TRADES HELPER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	9			2	0	1	8		

Transaction ID : SA11AI.207682

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

50.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 908 OF 1411

(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. NIXON, TERRY, , ,

Mailing Address 19409 NE Dawn Dr

City
YacoltState
WAZip Code
98675FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28Occupation (for Individual)
TRADES HELPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	26	2018

Transaction ID : SA11AI.207913

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NOELLE, JEREMY, , ,

Mailing Address 1421 N 14th Street

City
HerrinState
ILZip Code
62948FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

762.79

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208291

Amount of Each Receipt this Period

76.28

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NOLAN, MARIAN, S., ,

Mailing Address 804 E 33rd Street

City
LorainState
OHZip Code
44055FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ODJFS CUSTOMER SERVICE REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210410

Amount of Each Receipt this Period

8.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

104.78

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 909 OF 1411

(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. **NOMPLEGGI, ELIZABETH, M., ,**

Mailing Address 701 Hammond Branch Road
Apt. 101

City
Odenton

State
MD

Zip Code
21113

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 31 2018

Transaction ID : SA11AI.206401

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **NOMPLEGGI, ELIZABETH, M., ,**

Mailing Address 701 Hammond Branch Road
Apt. 101

City
Odenton

State
MD

Zip Code
21113

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 15 2018

Transaction ID : SA11AI.206780

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **NOONAN, JOHN, P., ,**

Mailing Address 601 S. 9th Street
#7

City
Minneapolis

State
MN

Zip Code
55404

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
STRATEGIC COMMUNICATIONS SPE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

771.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 31 2018

Transaction ID : SA11AI.206402

Amount of Each Receipt this Period

36.41

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

46.41

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
Detailed Summary Page

FOR LINE NUMBER: PAGE 910 OF 1411

(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. NOONAN, JOHN, P., ,

Mailing Address 601 S. 9th Street
#7

City
Minneapolis

State
MN

Zip Code
55404

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

STRATEGIC COMMUNICATIONS SPE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

807.86

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206781

Amount of Each Receipt this Period

36.41

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NORAH, DEBRA, L., ,

Mailing Address 2539 Mara Drive

City
Columbus

State
OH

Zip Code
43224

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

INFORMATION SYSTEMS TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209757

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NORAH, DEBRA, L., ,

Mailing Address 2539 Mara Drive

City
Columbus

State
OH

Zip Code
43224

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

INFORMATION SYSTEMS TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210411

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

54.41

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 911 OF 1411

(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. NORBIE, KEVIN, , ,			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td>01</td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.211743		M M M	D D D	Y Y Y Y Y Y	11	01	2018
M M M	D D D	Y Y Y Y Y Y								
11	01	2018								
Mailing Address 2205 John Avenue City Superior State WI Zip Code 54880			Amount of Each Receipt this Period <table border="1"> <tr> <td>20.00</td> </tr> </table> ☐ Memo Item		20.00					
20.00										
FEC ID number of contributing federal political committee. C										
Name of Employer (for Individual) AFSCME MN CN 5/STATE OF MN Occupation (for Individual) STAFF REPRESENTATIVE										
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼			Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>210.00</td> </tr> </table>		210.00					
210.00										
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. NOREN, JONATHAN, C ., ,			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td>09</td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.209758		M M M	D D D	Y Y Y Y Y Y	11	09	2018
M M M	D D D	Y Y Y Y Y Y								
11	09	2018								
Mailing Address 7582 N US Highway 68 Sr. 68 North City Xenia State OH Zip Code 45177			Amount of Each Receipt this Period <table border="1"> <tr> <td>9.00</td> </tr> </table> ☐ Memo Item		9.00					
9.00										
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 ▼ <table border="1"> <tr> <td>203.50</td> </tr> </table>		203.50					
203.50										
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. NOREN, JONATHAN, C ., ,			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td>23</td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.210412		M M M	D D D	Y Y Y Y Y Y	11	23	2018
M M M	D D D	Y Y Y Y Y Y								
11	23	2018								
Mailing Address 7582 N US Highway 68 Sr. 68 North City Xenia State OH Zip Code 45177			Amount of Each Receipt this Period <table border="1"> <tr> <td>9.00</td> </tr> </table> ☐ Memo Item		9.00					
9.00										
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 ▼ <table border="1"> <tr> <td>212.50</td> </tr> </table>		212.50					
212.50										
SUBTOTAL of Receipts This Page (optional)..... ▶			<table border="1"> <tr> <td>38.00</td> </tr> </table>		38.00					
38.00										
TOTAL This Period (last page this line number only)..... ▶			<table border="1"> <tr> <td></td> </tr> </table>							

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 912 OF 1411

(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. NORTON, DEIDRE, D, ,

Mailing Address 106 N 6th Street

City

Marshalltown

State

IA

Zip Code

50158

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)

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
 10 / 18 / 2018

Transaction ID : SA11AI.211852

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NORTON, DEIDRE, D, ,

Mailing Address 106 N 6th Street

City

Marshalltown

State

IA

Zip Code

50158

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)

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
 10 / 26 / 2018

Transaction ID : SA11AI.211920

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NORTON, HARVEY, , ,

Mailing Address 5123 Pebble Lane

City

Columbus

State

OH

Zip Code

43220

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

REALTY SPECIALIST III

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

206.50

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 23 / 2018

Transaction ID : SA11AI.210413

Amount of Each Receipt this Period

8.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

28.50

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 913 OF 1411

(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. NOVAK, JOHN, , ,

Mailing Address 4031 Executive Park Drive

City
HarrisburgState
PAZip Code
17111FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/NSP/LOCAL 1435Occupation (for Individual)
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
11			08			2018			

Transaction ID : SA11AI.207113

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NUNN, RICHARD, , ,

Mailing Address 31002 Corte De Los Santos

City
TemeculaState
CAZip Code
92592FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 1902Occupation (for Individual)
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
10			19			2018			

Transaction ID : SA11AI.211066

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NUNN, RICHARD, , ,

Mailing Address 31002 Corte De Los Santos

City
TemeculaState
CAZip Code
92592FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 1902Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			07			2018			

Transaction ID : SA11AI.211087

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

30.00

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 914 OF 1411

(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. NUNN, RICHARD, , ,

Mailing Address 31002 Corte De Los Santos

City
Temecula

State
CA

Zip Code
92592

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 1902

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 20 / 2018

Transaction ID : SA11AI.211108

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NUZZI, VICTORIA, M., ,

Mailing Address 9506 Park Meridian Drive

City
Indianapolis

State
IN

Zip Code
46260

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
REGIONAL FIELD ADMINISTRATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.54

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206403

Amount of Each Receipt this Period

39.81

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NUZZI, VICTORIA, M., ,

Mailing Address 9506 Park Meridian Drive

City
Indianapolis

State
IN

Zip Code
46260

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
REGIONAL FIELD ADMINISTRATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

886.35

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206782

Amount of Each Receipt this Period

39.81

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

89.62

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 915 OF 1411

(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. NYANKABUNA, NICKSON, O., ,

Mailing Address 3630 Penn Avenue N.

City
MinneapolisState
MNZip Code
55412FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MNOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.98

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	01	2018

Transaction ID : SA11AI.211744

Amount of Each Receipt this Period

92.14

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OATES, TRACEY, , ,

Mailing Address 374 Lucius Avenue

City
YoungstownState
OHZip Code
44507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

658.36

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	06	2018

Transaction ID : SA11AI.210924

Amount of Each Receipt this Period

60.98

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OBINA, AILEEN, , ,

Mailing Address 1374 Mailani Street

City
HiloState
HIZip Code
96720FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI RET CHPT 152Occupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

863.30

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	01	2018

Transaction ID : SA11AI.211045

Amount of Each Receipt this Period

83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

236.45

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 916 OF 1411

(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. OCHALLA, KEVIN, J., ,

Mailing Address 727 S Maple Avenue

City
Oak Park

State
IL

Zip Code
60304

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
ASSISTANT PUBLIC DEFENDANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

756.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 18 / 2018

Transaction ID : SA11AI.211803

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OCHALLA, KEVIN, J., ,

Mailing Address 727 S Maple Avenue

City
Oak Park

State
IL

Zip Code
60304

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
ASSISTANT PUBLIC DEFENDANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208292

Amount of Each Receipt this Period

84.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OCHMANEK, RYAN, C., ,

Mailing Address 2651 Point Pleasant Way

City
Toledo

State
OH

Zip Code
43611

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 ▼

443.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210415

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

166.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 917 OF 1411

(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. ODELL, DOUGLAS, A., ,

Mailing Address 26 Kester Drive

City

Mount Vernon

State

OH

Zip Code

43050

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 ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209129

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ODELL, DOUGLAS, A., ,

Mailing Address 26 Kester Drive

City

Mount Vernon

State

OH

Zip Code

43050

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 ▼

241.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209760

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ODELL, DOUGLAS, A., ,

Mailing Address 26 Kester Drive

City

Mount Vernon

State

OH

Zip Code

43050

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 ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210416

Amount of Each Receipt this Period

10.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

31.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 918 OF 1411

(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. OETH, KAREN, , ,

Mailing Address 3310 W Street

City

Eureka

State

CA

Zip Code

95503

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME CA CN 57

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2018

Transaction ID : SA11AI.211241

Amount of Each Receipt this Period

16.70

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OGLE, ZACHARY, T., ,

Mailing Address 1945 State Route 271 S

City

Lewisport

State

KY

Zip Code

42351

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

RETIREE FILED ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

632.83

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2018

Transaction ID : SA11AI.206404

Amount of Each Receipt this Period

30.19

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OGLE, ZACHARY, T., ,

Mailing Address 1945 State Route 271 S

City

Lewisport

State

KY

Zip Code

42351

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

RETIREE FILED ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

663.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2018

Transaction ID : SA11AI.206783

Amount of Each Receipt this Period

30.19

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

77.08

TOTAL This Period (last page this line number only)..... ►

X	11a		11b		11c		12		
	13		14		15		16		17

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

1169.30

 Memo Item

1706.88

Memo Item

1793.61

Memo Item

[illegible]

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 920 OF 1411

(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. OKATA, RUSSELL, K., ,

Mailing Address 1015 Wilder Avenue

City
HonoluluState
HIZip Code
96822FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI RET CHPT 152Occupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	01	2018

Transaction ID : SA11AI.211046

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OLAOSEBIKAN, TIMOTHY, , ,

Mailing Address 1s308 Holyoke

City
Villa ParkState
ILZip Code
60181FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
DIRECT SUPPORT PERSONNEL REF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208293

Amount of Each Receipt this Period

76.92

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OLIVER, LATASHA, A., ,

Mailing Address 1610 Oakwood Avenue

City
ColumbusState
OHZip Code
43207FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

398.87

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	06	2018

Transaction ID : SA11AI.210925

Amount of Each Receipt this Period

35.40

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

212.32

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 921 OF 1411

(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. OLIVER, LAURIE, M., ,

Mailing Address 1291 Coe Drive

City
Columbus

State
OH

Zip Code
43207

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
MANAGEMENT ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209761

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OLIVER, LAURIE, M., ,

Mailing Address 1291 Coe Drive

City
Columbus

State
OH

Zip Code
43207

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
MANAGEMENT ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210417

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OLLIE, ANTHONY, J., ,

Mailing Address 27 Lexington Square

City
Euclid

State
OH

Zip Code
44143

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
JUVENILE CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210418

Amount of Each Receipt this Period

8.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

26.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 922 OF 1411

(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. OLSON, ANDREW, S., ,

Mailing Address 800 5th Avenue NE

City
AustinState
MNZip Code
55912FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MNOccupation (for Individual)
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
11			01			2018			

Transaction ID : SA11AI.211745

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OLSON, HOLLY, Y., ,

Mailing Address 15443 Martins Hundred Drive

City
CentervilleState
VAZip Code
20120FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
DIRECTOR, GENERAL SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1459.52

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2018			

Transaction ID : SA11AI.206406

Amount of Each Receipt this Period

72.11

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OLSON, HOLLY, Y., ,

Mailing Address 15443 Martins Hundred Drive

City
CentervilleState
VAZip Code
20120FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
DIRECTOR, GENERAL SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1531.63

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2018			

Transaction ID : SA11AI.206785

Amount of Each Receipt this Period

72.11

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

164.22

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 923 OF 1411

(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. OMAR, ABDULWAHAB, A., ,Mailing Address 2705 Pillsbury Avenue S.
Apt. 205City
MinneapolisState
MNZip Code
55408FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MNOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

566.58

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2018

Transaction ID : SA11AI.211746

Amount of Each Receipt this Period

72.63

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OPENLANDER, MARY, C., ,

Mailing Address 466 Prospect

City
MuirState
MIZip Code
48860FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MI CN 25Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2018

Transaction ID : SA11AI.211344

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OPENLANDER, MARY, C., ,

Mailing Address 466 Prospect

City
MuirState
MIZip Code
48860FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MI CN 25Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

462.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	20	/	2018

Transaction ID : SA11AI.211395

Amount of Each Receipt this Period

21.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

114.63

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 924 OF 1411

(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. ORIOLO, DANIEL, C., , JR.

Mailing Address 17527 Longview Lane

City
Olney

State
MD

Zip Code
20832

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
SOFTWARE TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206407

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ORIOLO, DANIEL, C., , JR.

Mailing Address 17527 Longview Lane

City
Olney

State
MD

Zip Code
20832

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
SOFTWARE TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206786

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ORNER, WILLIAM, D., ,

Mailing Address 1991 Market Street Ext.

City
Middleton

State
PA

Zip Code
17057

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)
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
10 / 31 / 2018

Transaction ID : SA11AI.207115

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 925 OF 1411

(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. ORRELL, JAMES, W., ,

Mailing Address 5705 Quebec Avenue N
Apt. 204B

City
Minneapolis

State
MN

Zip Code
55428

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211747

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ORRIS, SUSAN, , ,

Mailing Address 536 Second Street

City
Steelton

State
PA

Zip Code
17113

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 ▼

579.48

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207116

Amount of Each Receipt this Period

52.68

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ORSBORN, GARY, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 25 / 2018

Transaction ID : SA11AI.207481

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

117.68

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 926 OF 1411

(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. ORSBORN, GARY, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

735.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207683

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ORSBORN, GARY, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

770.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207914

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ORTIZ, JOSE, G., ,

Mailing Address 615 W. Main Street

City
Ashland

State
OH

Zip Code
44805

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
JUVENILE CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209132

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 927 OF 1411

(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. ORTIZ, JOSE, G., ,

Mailing Address 615 W. Main Street

City
Ashland

State
OH

Zip Code
44805

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
JUVENILE CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209763

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ORTIZ, JOSE, G., ,

Mailing Address 615 W. Main Street

City
Ashland

State
OH

Zip Code
44805

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
JUVENILE CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210419

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OSBORN, MARY, E., ,

Mailing Address 1823 25th Avenue N.

City
Minneapolis

State
MN

Zip Code
55411

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

211.85

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211748

Amount of Each Receipt this Period

22.30

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

42.30

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 928 OF 1411

(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. OSHIRO, PETER, S., ,

Mailing Address 95-1076 Pikokea Street

City

Mililani Town

State

HI

Zip Code

96789

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME HI LOC 152

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

462.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2018			

Transaction ID : SA11AI.211012

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OSTLING, ERIC, J., ,

Mailing Address 2226 Liberty Road

City

Youngstown

State

OH

Zip Code

44505

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
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

242.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2018			

Transaction ID : SA11AI.209133

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OSTLING, ERIC, J., ,

Mailing Address 2226 Liberty Road

City

Youngstown

State

OH

Zip Code

44505

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
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

253.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			09			2018			

Transaction ID : SA11AI.209764

Amount of Each Receipt this Period

11.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

64.00

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 929 OF 1411

(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. **OSTLING, ERIC, J., ,**

Mailing Address 2226 Liberty Road

City

Youngstown

State

OH

Zip Code

44505

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 ▼

264.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210420

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **OSTRAND, SHARON, , ,**

Mailing Address 720 22nd Avenue Court

City

Moline

State

IL

Zip Code

61265

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

DAY CARE LIC REP II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

Transaction ID : SA11AI.208294

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **OSTRANDER, CURT, A., ,**

Mailing Address 20 First Tavern Road

City

Jaffrey

State

NH

Zip Code

03452-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

INT'L UNION BARGAINING REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1054.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2018

Transaction ID : SA11AI.206408

Amount of Each Receipt this Period

53.05

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

104.05

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 930 OF 1411

(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. OSTRANDER, CURT, A., ,

Mailing Address 20 First Tavern Road

City
Jaffrey

State
NH

Zip Code
03452-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

INT'L UNION BARGAINING REPRESE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1107.69

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206787

Amount of Each Receipt this Period

53.05

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OSWALD, LISA, R., ,

Mailing Address 490 Marion Cardington Road E

City
Marion

State
OH

Zip Code
43302

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209134

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OSWALD, LISA, R., ,

Mailing Address 490 Marion Cardington Road E

City
Marion

State
OH

Zip Code
43302

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 ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209765

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

73.05

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 931 OF 1411

(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. OSWALD, LISA, R., ,

Mailing Address 490 Marion Cardington Road E

City
Marion

State
OH

Zip Code
43302

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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210421

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OTERO, WILFREDO, , ,

Mailing Address 220 Maple Street

City

South Amherst

State

OH

Zip Code

44001

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 ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210422

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OUSLEY, JENNETT, L., ,

Mailing Address 1396 Scenic Road

City

Vinton

State

OH

Zip Code

45686

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
THERAPUTIC PROGRAM TECHNICIAI

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209136

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

28.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 932 OF 1411

(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. OUSLEY, JENNETT, L., ,

Mailing Address 1396 Scenic Road

 City
 Vinton

 State
 OH

 Zip Code
 45686

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.209767

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OUSLEY, JENNETT, L., ,

Mailing Address 1396 Scenic Road

 City
 Vinton

 State
 OH

 Zip Code
 45686

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.210423

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OWENS, WILLIAM, G., , JR.

Mailing Address 823 Ridgeview Drive

 City
 Bellefontaine

 State
 OH

 Zip Code
 43311

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.209137

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 933 OF 1411

(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. OWENS, WILLIAM, G., , JR.

Mailing Address 823 Ridgeview Drive

City
BellefontaineState
OHZip Code
43311FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209768

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OWENS, WILLIAM, G., , JR.

Mailing Address 823 Ridgeview Drive

City
BellefontaineState
OHZip Code
43311FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210424

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PACHECO, CAROL, D., ,

Mailing Address 6800 N High Street

City
WorthingtonState
OHZip Code
43085FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/METROHEALTHOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	23	2018

Transaction ID : SA11AI.210826

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

40.00

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 934 OF 1411

(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. PACHECO, CAROL, D., ,

Mailing Address 6800 N High Street

City
Worthington

State
OH

Zip Code
43085

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/METROHEALTH

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210926

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PALAY, MICHELLE, , ,

Mailing Address 8033 Excelsior Drive

City
Madison

State
WI

Zip Code
53717

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WI CN 32

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.06

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 24 / 2018

Transaction ID : SA11AI.211422

Amount of Each Receipt this Period

9.23

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PALAY, MICHELLE, , ,

Mailing Address 8033 Excelsior Drive

City
Madison

State
WI

Zip Code
53717

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WI CN 32

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

212.29

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211423

Amount of Each Receipt this Period

9.23

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

28.46

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 935 OF 1411

(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. PALAY, MICHELLE, , ,

Mailing Address 8033 Excelsior Drive

City
Madison

State
WI

Zip Code
53717

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WI CN 32

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.52

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 16 / 2018

Transaction ID : SA11AI.211445

Amount of Each Receipt this Period

9.23

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PALMER, JONATHAN, L., ,

Mailing Address 4002 Thicket Lane

City
Harrisburg

State
PA

Zip Code
17110

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.207117

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PALMER, ROBERT, , ,

Mailing Address 139 Mountain Laurel Court

City
Romeoville

State
IL

Zip Code
60446

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
JUVENILE JUSTICE SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208295

Amount of Each Receipt this Period

44.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

73.23

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 936 OF 1411

(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. PALMQUIST, WILLIAM, R., ,

Mailing Address 733 37th Avenue

City
SeattleState
WAZip Code
98122FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28Occupation (for Individual)
STRATEGIC COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3205.84

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	4		2	0	1	8

Transaction ID : SA11AI.207915

Amount of Each Receipt this Period

374.80

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PANCIERA, RACHEL, S., ,

Mailing Address 5210 Biddison Avenue

City
BaltimoreState
MDZip Code
21206FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

448.03

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	1	8

Transaction ID : SA11AI.206409

Amount of Each Receipt this Period

49.59

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PANCIERA, RACHEL, S., ,

Mailing Address 5210 Biddison Avenue

City
BaltimoreState
MDZip Code
21206FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

497.62

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	5		2	0	1	8

Transaction ID : SA11AI.206788

Amount of Each Receipt this Period

49.59

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

473.98

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 937 OF 1411

(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. PANTOJA, GONZALO, , ,

Mailing Address 1033 South Emily Drive

City
West Covina

State
CA

Zip Code
91790

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 1902

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 19 / 2018

Transaction ID : SA11AI.211067

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PANTOJA, GONZALO, , ,

Mailing Address 1033 South Emily Drive

City
West Covina

State
CA

Zip Code
91790

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 1902

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211088

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PANTOJA, GONZALO, , ,

Mailing Address 1033 South Emily Drive

City
West Covina

State
CA

Zip Code
91790

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 1902

Occupation (for Individual)
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 Y
11 / 20 / 2018

Transaction ID : SA11AI.211109

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 938 OF 1411

(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. PANUI, CLARA, K., ,

Mailing Address 85-1003 Hoolokahi Street

City

Waianae

State

HI

Zip Code

96792

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME HI LOC 152

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 01 / 2018

Transaction ID : SA11AI.211013

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PARK, CAROLYN, , ,

Mailing Address 1670 Bruce Avenue

City

Cincinnati

State

OH

Zip Code

45223

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH CN 8

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.09

Date of Receipt

11 / 06 / 2018

Transaction ID : SA11AI.210927

Amount of Each Receipt this Period

55.48

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PARKE, MEGAN, , ,

Mailing Address 3133 Moore Street SE

City

Olympia

State

WA

Zip Code

98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28

Occupation (for Individual)

ORGANIZING DIRECTOR

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 14 / 2018

Transaction ID : SA11AI.207916

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

95.48

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 939 OF 1411

(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. PARKER, DANIEL, L., ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.207684

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PARKER, DANIEL, L., ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 26 / 2018

Transaction ID : SA11AI.207917

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PARKER, KOREN, , ,

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 ▼

582.59

Date of Receipt

11 / 08 / 2018

Transaction ID : SA11AI.207118

Amount of Each Receipt this Period

54.84

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

74.84

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 940 OF 1411

(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. PARKER-SWAYZE, OLIE, L., ,

Mailing Address 831 S 19th Avenue

City
MaywoodState
ILZip Code
60153FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
UNEMPLOYMENT INS. REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.40

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208296

Amount of Each Receipt this Period

31.26

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PARLE, DENNIS, , ,

Mailing Address 203 View Drive

City

Boulder Creek

State

CA

Zip Code

95006

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA CN 57Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.40

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	14	2018

Transaction ID : SA11AI.211242

Amount of Each Receipt this Period

8.35

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PARM-LOVETT, RHONDA, L., ,Mailing Address 553 Wilcox Road
Apt. B

City

Youngstown

State

OH

Zip Code

44515

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
WORKERS COMPENSATION CLAIMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.209138

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

49.61

TOTAL This Period (last page this line number only).....▶

X	11a		11b		11c		12		
	13		14		15		16		17

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

FEC Schedule A (Form 3X) Rev. 06/2016

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 942 OF 1411
(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. PASCAL, ERIC, G., ,

Mailing Address 3351 Lake Elmo Avenue N.

City

Lake Elmo

State

MN

Zip Code

55042

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	01	2018

Transaction ID : SA11AI.211749

Amount of Each Receipt this Period

40.00

☐

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PASCHAL, CATHERINE, M., ,Mailing Address 551 Fredricks Avenue
Apt. 270

City

Oceanside

State

CA

Zip Code

92058

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME CA LOC 3930

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	07	2018

Transaction ID : SA11AI.211160

Amount of Each Receipt this Period

25.00

☐

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PASIPANODYA, TSIKA, M., ,Mailing Address 3340 Toledo Terrace
#773

City

Hyattsville

State

MD

Zip Code

20782

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

EDUCATION COORDINATOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

841.07

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206410

Amount of Each Receipt this Period

42.82

☐

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

107.82

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 943 OF 1411

(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. PASIPANODYA, TSIKA, M., ,

Mailing Address 3340 Toledo Terrace
#773

City
Hyattsville

State
MD

Zip Code
20782

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
EDUCATION COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

883.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206789

Amount of Each Receipt this Period

42.82

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PASSMORE, DANIEL, , ,

Mailing Address 434 Anderson Street

City

Curwensville

State
PA

Zip Code
16833

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.207119

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PATERSON, TEAGUE, P., ,

Mailing Address 319 Branch Drive

City

Silver Spring

State
MD

Zip Code
20901

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
DEPUTY GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1486.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206411

Amount of Each Receipt this Period

72.11

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

134.93

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 944 OF 1411

(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. PATERSON, TEAGUE, P., ,

Mailing Address 319 Branch Drive

City
Silver Spring

State
MD

Zip Code
20901

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
DEPUTY GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1558.96

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206790

Amount of Each Receipt this Period

72.11

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PATTERSON, JAMES, B., ,

Mailing Address 630 Fountain Street

City
Marion

State
OH

Zip Code
43302

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209139

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PATTERSON, JAMES, B., ,

Mailing Address 630 Fountain Street

City
Marion

State
OH

Zip Code
43302

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 ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209770

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

92.11

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 945 OF 1411

(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. PATTERSON, JAMES, B., ,

Mailing Address 630 Fountain Street

City
Marion

State
OH

Zip Code
43302

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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210426

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PATTERSON, MARIA, E., ,

Mailing Address 1620 E Broad Street
Apt. 408

City
Columbus

State
OH

Zip Code
43203

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
DISABILITY CLAIMS CORD.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209140

Amount of Each Receipt this Period

14.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PATTERSON, MARIA, E., ,

Mailing Address 1620 E Broad Street
Apt. 408

City
Columbus

State
OH

Zip Code
43203

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
DISABILITY CLAIMS CORD.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

333.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209771

Amount of Each Receipt this Period

14.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

39.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 946 OF 1411

(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. PATTERSON, MARIA, E., ,

Mailing Address 1620 E Broad Street
Apt. 408

City
Columbus

State
OH

Zip Code
43203

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
DISABILITY CLAIMS CORD.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210427

Amount of Each Receipt this Period

14.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PATTERSON, MARKUS, T., ,

Mailing Address 1297 McKaltan Avenue

City
Columbus

State
OH

Zip Code
43232

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
JUVENILE CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209141

Amount of Each Receipt this Period

14.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PATTERSON, MARKUS, T., ,

Mailing Address 1297 McKaltan Avenue

City
Columbus

State
OH

Zip Code
43232

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
JUVENILE CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

333.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209772

Amount of Each Receipt this Period

14.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

43.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 947 OF 1411

(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. PATTERSON, MARKUS, T., ,

Mailing Address 1297 McKaltan Avenue

City
Columbus

State
OH

Zip Code
43232

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
JUVENILE CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210428

Amount of Each Receipt this Period

14.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PAULEY, TYRONE, R., ,

Mailing Address 1002 125th Street Court E.

City
Tacoma

State
WA

Zip Code
98445

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
10 / 25 / 2018

Transaction ID : SA11AI.207483

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PAULEY, TYRONE, R., ,

Mailing Address 1002 125th Street Court E.

City
Tacoma

State
WA

Zip Code
98445

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207685

Amount of Each Receipt this Period

10.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

35.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 948 OF 1411

(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. PAULEY, TYRONE, R., ,

Mailing Address 1002 125th Street Court E.

City
Tacoma

State
WA

Zip Code
98445

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF 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
11 / 26 / 2018

Transaction ID : SA11AI.207918

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PEACE, BRIAN, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 09 / 2018

Transaction ID : SA11AI.207686

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PEACE, BRIAN, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 26 / 2018

Transaction ID : SA11AI.207919

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 949 OF 1411

(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. PEACH, ROSALYN, O., ,

Mailing Address P.O. Box 79

City
Robinson

State
IL

Zip Code
62454

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

CORRECTIONAL LIEUTENANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208298

Amount of Each Receipt this Period

29.40

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PECKHAM, SUSAN, , ,

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 (for Individual)

AFSCME INT'L/STATE STREET

Occupation (for Individual)

RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 02 / 2018

Transaction ID : SA11AI.206792

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PEEPER, RANDY, J., ,

Mailing Address 107 Linden Avenue

City
Cambridge

State
OH

Zip Code
43725

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

THERAPUTIC PROGRAM TECHNICIAI

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

297.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209142

Amount of Each Receipt this Period

13.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

62.90

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 950 OF 1411

(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. PEEPER, RANDY, J., ,

Mailing Address 107 Linden Avenue

City
Cambridge

State
OH

Zip Code
43725

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209773

Amount of Each Receipt this Period

13.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PEEPER, RANDY, J., ,

Mailing Address 107 Linden Avenue

City
Cambridge

State
OH

Zip Code
43725

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210429

Amount of Each Receipt this Period

13.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PELO, JOHN, M., ,

Mailing Address 512 Boylston Avenue E
Apt. 104

City
Seattle

State
WA

Zip Code
98102

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 09 / 2018

Transaction ID : SA11AI.207687

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

37.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 951 OF 1411

(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. PELO, JOHN, M., , Mailing Address 512 Boylston Avenue E Apt. 104 City Seattle State WA Zip Code 98102 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00			Date of Receipt 11 / 26 / 2018 Transaction ID : SA11AI.207920 Amount of Each Receipt this Period 10.00 ☐ Memo Item	
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. PELOTE, WILLIE, L., , Mailing Address 351 Ross Way City Sacramento State CA Zip Code 95864 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME INT'L/STATE STREET Occupation (for Individual) RETIREE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 410.30			Date of Receipt 11 / 02 / 2018 Transaction ID : SA11AI.206793 Amount of Each Receipt this Period 37.30 ☐ Memo Item	
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. PELZEK, MARK, A., , Mailing Address 6312 S 20th Street City Milwaukee State WI Zip Code 53221 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME WI CN 32 Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) Aggregate Year-to-Date ▼ 306.60			Date of Receipt 10 / 31 / 2018 Transaction ID : SA11AI.211446 Amount of Each Receipt this Period 14.86 ☐ Memo Item	
SUBTOTAL of Receipts This Page (optional)..... ▶			62.16	
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 952 OF 1411

(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. PENIX, CHRISTINA, A., ,

Mailing Address 12981 Oakwood Way NW

City
Baltimore

State
OH

Zip Code
43105

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209774

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PENIX, CHRISTINA, A., ,

Mailing Address 12981 Oakwood Way NW

City
Baltimore

State
OH

Zip Code
43105

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210430

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PENN, BENJAMIN, , ,

Mailing Address 111 Delmar Drive

City
Catlin

State
IL

Zip Code
61817

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
CORRECTIONAL OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

714.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208299

Amount of Each Receipt this Period

84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

102.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 953 OF 1411

(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. PEOPLES, JAMES, P., ,Mailing Address 2804 Thackeray Avenue NW
Apt. ACity
MassillonState
OHZip Code
44646FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
JUVENILE CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M	D D	Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210431

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PERIGO, WILLIAM, J., ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
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
11	09	2018

Transaction ID : SA11AI.207688

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PERIGO, WILLIAM, J., ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
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
11	26	2018

Transaction ID : SA11AI.207921

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

28.50

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 954 OF 1411

(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. PERILLO, PAMELA, , ,

Mailing Address 9270 Billingsley Road

City

White Plains

State

MD

Zip Code

20695

FEC ID number of contributing
federal political committee.

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2018

Transaction ID : SA11AI.206413

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PERILLO, PAMELA, , ,

Mailing Address 9270 Billingsley Road

City

White Plains

State

MD

Zip Code

20695

FEC ID number of contributing
federal political committee.

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2018

Transaction ID : SA11AI.206794

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PERKINSON, HAROLD, , ,

Mailing Address 48 1st Avenue SW

City

Etna

State

OH

Zip Code

43062

FEC ID number of contributing
federal political committee.

Name of Employer (for Individual)

AFSCME OH CN 8/COLUMBUS

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2018

Transaction ID : SA11AI.210827

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 955 OF 1411

(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. PERKINSON, HAROLD, , ,

Mailing Address 48 1st Avenue SW

City

Etna

State

OH

Zip Code

43062

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH CN 8/COLUMBUS

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

221.26

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.210828

Amount of Each Receipt this Period

9.62

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PERKINSON, HAROLD, , ,

Mailing Address 48 1st Avenue SW

City

Etna

State

OH

Zip Code

43062

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH CN 8/COLUMBUS

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

230.88

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 13 / 2018

Transaction ID : SA11AI.210928

Amount of Each Receipt this Period

9.62

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PERMAUL, LLOYD, A., ,

Mailing Address 92 Willow Street

City

Bloomfield

State

NJ

Zip Code

07003-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

754.21

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206414

Amount of Each Receipt this Period

37.72

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

56.96

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 956 OF 1411

(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. PERMAUL, LLOYD, A., ,

Mailing Address 92 Willow Street

City
Bloomfield

State
NJ

Zip Code
07003-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

791.93

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206795

Amount of Each Receipt this Period

37.72

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PERREIRA, RANDOLPH, P., ,

Mailing Address 1044 Mokuhanu Street

City
Honolulu

State
HI

Zip Code
96825

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 152

Occupation (for Individual)
EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2191.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206160

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PERREIRA, RANDOLPH, P., ,

Mailing Address 1044 Mokuhanu Street

City
Honolulu

State
HI

Zip Code
96825

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 152

Occupation (for Individual)
EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2391.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211014

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

251.72

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 957 OF 1411

(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. PERROW, ELIZABETH, , ,

Mailing Address 958 N. Harrison Street

City
ArlingtonState
VAZip Code
22205FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ASSISTANT TO JUD. PANEL CHAIRPI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1110.40

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206415

Amount of Each Receipt this Period

53.32

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PERROW, ELIZABETH, , ,

Mailing Address 958 N. Harrison Street

City
ArlingtonState
VAZip Code
22205FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ASSISTANT TO JUD. PANEL CHAIRP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1163.72

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	15	2018

Transaction ID : SA11AI.206796

Amount of Each Receipt this Period

53.32

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PERRY, BONNIE, M., ,

Mailing Address 1393 Penhurst Road

City
ClevelandState
OHZip Code
44110FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH CN 8/CLEVELAND

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

202.02

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	22	2018

Transaction ID : SA11AI.210829

Amount of Each Receipt this Period

9.62

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

116.26

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 958 OF 1411

(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. PERRY, BONNIE, M., ,

Mailing Address 1393 Penhurst Road

City
ClevelandState
OHZip Code
44110FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/CLEVELANDOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	06	2018

Transaction ID : SA11AI.210929

Amount of Each Receipt this Period

9.62

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PERRY, MICHAEL, S., ,

Mailing Address 313 Sheridan Road

City
WilmetteState
ILZip Code
60091FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31Occupation (for Individual)
DIRECTOR EMP. INV. DEV. & TRAINI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

876.21

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208300

Amount of Each Receipt this Period

87.62

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PERSON, MICHAEL, D., ,

Mailing Address 1909 Scott Valley Drive

City
ColumbusState
OHZip Code
43223FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.209145

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

107.24

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 959 OF 1411

(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. PERSON, MICHAEL, D., ,

Mailing Address 1909 Scott Valley Drive

City
Columbus

State
OH

Zip Code
43223

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 ▼

230.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209776

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PERSON, MICHAEL, D., ,

Mailing Address 1909 Scott Valley Drive

City
Columbus

State
OH

Zip Code
43223

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 ▼

240.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210432

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PETEFISH, NICHOLAS, A., ,

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 (for Individual)
AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

218.70

Date of Receipt

10 / 18 / 2018

Transaction ID : SA11AI.211853

Amount of Each Receipt this Period

10.44

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.44

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 960 OF 1411

(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. PETEFISH, NICHOLAS, A., ,

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 (for Individual)

AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

229.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2018

Transaction ID : SA11AI.211921

Amount of Each Receipt this Period

10.44

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PETERS, ANYA, E., ,

Mailing Address 7026 Black Oak Road

City

Elkridge

State

MD

Zip Code

21075

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

MEETING, TRAVEL AND HOUSING C

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

630.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2018

Transaction ID : SA11AI.206416

Amount of Each Receipt this Period

31.01

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PETERS, ANYA, E., ,

Mailing Address 7026 Black Oak Road

City

Elkridge

State

MD

Zip Code

21075

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

MEETING, TRAVEL AND HOUSING CC

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

661.13

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2018

Transaction ID : SA11AI.206797

Amount of Each Receipt this Period

31.01

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

72.46

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 961 OF 1411

(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. PETERS, BOBBIE, L., ,

Mailing Address 14999 Wheeler Road

City
Lagrange

State
OH

Zip Code
44050

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
SECRETARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

506.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209146

Amount of Each Receipt this Period

23.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PETERS, BOBBIE, L., ,

Mailing Address 14999 Wheeler Road

City
Lagrange

State
OH

Zip Code
44050

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
SECRETARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

529.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209777

Amount of Each Receipt this Period

23.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PETERS, BOBBIE, L., ,

Mailing Address 14999 Wheeler Road

City
Lagrange

State
OH

Zip Code
44050

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
SECRETARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

552.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210433

Amount of Each Receipt this Period

23.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

69.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 962 OF 1411

(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. PETERSEN, TY, , , Mailing Address 370 Crescent Loop <table> <tr> <td>City Vienna</td> <td>State IL</td> <td>Zip Code 62995</td> </tr> </table> FEC ID number of contributing federal political committee. C <table> <tr> <td>Name of Employer (for Individual) AFSCME IL CN 31</td> <td>Occupation (for Individual) STAFF REPRESENTATIVE</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 770.79			City Vienna	State IL	Zip Code 62995	Name of Employer (for Individual) AFSCME IL CN 31	Occupation (for Individual) STAFF REPRESENTATIVE	Date of Receipt <table> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td>/</td> <td>05</td> <td>/</td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.208301 Amount of Each Receipt this Period 77.28 ☐ Memo Item		M M M	/	D D D	/	Y Y Y Y Y Y	11	/	05	/	2018
City Vienna	State IL	Zip Code 62995																	
Name of Employer (for Individual) AFSCME IL CN 31	Occupation (for Individual) STAFF REPRESENTATIVE																		
M M M	/	D D D	/	Y Y Y Y Y Y															
11	/	05	/	2018															
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. PETERSON, DARLA, R., , Mailing Address P.O. Box 412 <table> <tr> <td>City Belfair</td> <td>State WA</td> <td>Zip Code 98528</td> </tr> </table> FEC ID number of contributing federal political committee. C <table> <tr> <td>Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA</td> <td>Occupation (for Individual) STAFF REPRESENTATIVE</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00			City Belfair	State WA	Zip Code 98528	Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA	Occupation (for Individual) STAFF REPRESENTATIVE	Date of Receipt <table> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td>/</td> <td>25</td> <td>/</td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.207487 Amount of Each Receipt this Period 10.50 ☐ Memo Item		M M M	/	D D D	/	Y Y Y Y Y Y	10	/	25	/	2018
City Belfair	State WA	Zip Code 98528																	
Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA	Occupation (for Individual) STAFF REPRESENTATIVE																		
M M M	/	D D D	/	Y Y Y Y Y Y															
10	/	25	/	2018															
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. PETERSON, DARLA, R., , Mailing Address P.O. Box 412 <table> <tr> <td>City Belfair</td> <td>State WA</td> <td>Zip Code 98528</td> </tr> </table> FEC ID number of contributing federal political committee. C <table> <tr> <td>Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA</td> <td>Occupation (for Individual) STAFF REPRESENTATIVE</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) Aggregate Year-to-Date ▼ 220.50			City Belfair	State WA	Zip Code 98528	Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA	Occupation (for Individual) STAFF REPRESENTATIVE	Date of Receipt <table> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td>/</td> <td>09</td> <td>/</td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.207689 Amount of Each Receipt this Period 10.50 ☐ Memo Item		M M M	/	D D D	/	Y Y Y Y Y Y	11	/	09	/	2018
City Belfair	State WA	Zip Code 98528																	
Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA	Occupation (for Individual) STAFF REPRESENTATIVE																		
M M M	/	D D D	/	Y Y Y Y Y Y															
11	/	09	/	2018															
SUBTOTAL of Receipts This Page (optional).....▶			98.28																
TOTAL This Period (last page this line number only).....▶																			

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 963 OF 1411

(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. PETERSON, DARLA, R., ,

Mailing Address P.O. Box 412

City
BelfairState
WAZip Code
98528FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M	D D	Y Y Y Y
11	26	2018

Transaction ID : SA11AI.207923

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PETERSON, KOLBY, , ,

Mailing Address 9417 Braymore Circle

City

Fairfax Station

State

VA

Zip Code

22039

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
ASSISTANT DIRECTOR, POLLING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1332.80

Date of Receipt

M M	D D	Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206417

Amount of Each Receipt this Period

66.64

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PETERSON, KOLBY, , ,

Mailing Address 9417 Braymore Circle

City

Fairfax Station

State

VA

Zip Code

22039

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
ASSISTANT DIRECTOR, POLLING

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1399.44

Date of Receipt

M M	D D	Y Y Y Y
11	15	2018

Transaction ID : SA11AI.206798

Amount of Each Receipt this Period

66.64

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

143.78

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 964 OF 1411

(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. PETTAWAY, JESSICA, T., ,

Mailing Address 4321 Shawn Terrace

City
Toledo

State
OH

Zip Code
43615

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/CANTON

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.42

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 23 / 2018

Transaction ID : SA11AI.210830

Amount of Each Receipt this Period

9.61

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PETTAWAY, JESSICA, T., ,

Mailing Address 4321 Shawn Terrace

City
Toledo

State
OH

Zip Code
43615

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/CANTON

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.03

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 02 / 2018

Transaction ID : SA11AI.210831

Amount of Each Receipt this Period

9.61

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PETTAWAY, JESSICA, T., ,

Mailing Address 4321 Shawn Terrace

City
Toledo

State
OH

Zip Code
43615

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/CANTON

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.64

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 20 / 2018

Transaction ID : SA11AI.210930

Amount of Each Receipt this Period

9.61

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

28.83

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 965 OF 1411

(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. PETTIT, RICHARD, L., ,

Mailing Address 1957 Coppermine Road

City
Buchanan

State
GA

Zip Code
30113

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ASSISTANT TO REGIONAL DIRECTO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1785.40

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206418

Amount of Each Receipt this Period

82.17

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PETTIT, RICHARD, L., ,

Mailing Address 1957 Coppermine Road

City
Buchanan

State
GA

Zip Code
30113

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ASSISTANT TO REGIONAL DIRECTO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1867.77

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206799

Amount of Each Receipt this Period

82.37

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PFLUGMACHER, STACY, , ,

Mailing Address 4679 Timberview Drive

City
Auburn

State
IL

Zip Code
62615

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

858.38

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208302

Amount of Each Receipt this Period

85.84

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

250.38

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 966 OF 1411

(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. PHELPS, GREGORY, L., ,

Mailing Address 1609 Rose Place

City
Cincinnati

State
OH

Zip Code
45237

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
MAINTENANCE REPAIR TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209147

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PHELPS, GREGORY, L., ,

Mailing Address 1609 Rose Place

City
Cincinnati

State
OH

Zip Code
45237

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
MAINTENANCE REPAIR TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209778

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PHELPS, GREGORY, L., ,

Mailing Address 1609 Rose Place

City
Cincinnati

State
OH

Zip Code
45237

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
MAINTENANCE REPAIR TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210434

Amount of Each Receipt this Period

14.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

42.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 967 OF 1411

(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. PHENICIE, BRYAN, T., ,

Mailing Address 684 Niles Road

City
Franklin

State
PA

Zip Code
16323

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

383.86

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207120

Amount of Each Receipt this Period

31.26

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PHILLIPS, ALVIN, J., , JR.

Mailing Address 721 Whitmore Avenue

City
Dayton

State
OH

Zip Code
45417

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/DAYTON METROHEALTH

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.03

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 23 / 2018

Transaction ID : SA11AI.210832

Amount of Each Receipt this Period

9.61

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PHILLIPS, ALVIN, J., , JR.

Mailing Address 721 Whitmore Avenue

City
Dayton

State
OH

Zip Code
45417

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/DAYTON METROHEALTH

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.64

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210833

Amount of Each Receipt this Period

9.61

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.48

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 968 OF 1411

(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. PHILLIPS, ALVIN, J., , JR.

Mailing Address 721 Whitmore Avenue

City
Dayton

State
OH

Zip Code
45417

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH CN 8/DAYTON METROHEALTH

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.25

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 21 / 2018

Transaction ID : SA11AI.210931

Amount of Each Receipt this Period

9.61

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PHILLIPS, KELLY, , ,

Mailing Address 390 Worthington Road

City
Westerville

State
OH

Zip Code
43082

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210435

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PHIPPS, JEFFERY, M., ,

Mailing Address 5403 75th Street NE

City
Marysville

State
WA

Zip Code
98270

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 25 / 2018

Transaction ID : SA11AI.207488

Amount of Each Receipt this Period

17.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

126.61

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 969 OF 1411

(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. PHIPPS, JEFFERY, M., ,

Mailing Address 5403 75th Street NE

City
Marysville

State
WA

Zip Code
98270

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207690

Amount of Each Receipt this Period

17.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PHIPPS, JEFFERY, M., ,

Mailing Address 5403 75th Street NE

City
Marysville

State
WA

Zip Code
98270

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207924

Amount of Each Receipt this Period

17.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PHIPPS, PEGGY, A., ,

Mailing Address 800 Iowa Street

City
Stanhope

State
IA

Zip Code
50246

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)
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
10 / 18 / 2018

Transaction ID : SA11AI.211854

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

44.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 970 OF 1411

(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. PHIPPS, PEGGY, A., ,

Mailing Address 800 Iowa Street

City
StanhopeState
IAZip Code
50246FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/STATE OF IAOccupation (for Individual)
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
1	0		2	6		2	0	1	8

Transaction ID : SA11AI.211922

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PICKARD, STEVAN, P., ,

Mailing Address 3325 Capricio Street, NE

City
CantonState
OHZip Code
44721-2702FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1035.30

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	6		2	0	1	8

Transaction ID : SA11AI.210932

Amount of Each Receipt this Period

94.54

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PICKLESIMER, NATHAN, C., ,

Mailing Address 1415 Fahlander Drive N

City
ColumbusState
OHZip Code
43229FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
DISABILITY CLAIMS ADJUSTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	3		2	0	1	8

Transaction ID : SA11AI.210436

Amount of Each Receipt this Period

8.50

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

113.04

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 971 OF 1411

(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. PIEPSNEY, MICHAEL, , ,

Mailing Address 14300 Old Pleasant Road

City
MiddleburgState
OHZip Code
44130FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

655.62

Date of Receipt

M	M	M	D	D	D	Y	Y	Y	Y	Y	Y
1	1	1	0	6		2	0	1	8		

Transaction ID : SA11AI.210933

Amount of Each Receipt this Period

60.74

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PIERRE, ERICA, D., ,

Mailing Address 1290 Cottonwood Drive

City
AuroraState
ILZip Code
60506FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
CORRECTIONS OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	M	D	D	D	Y	Y	Y	Y	Y	Y
1	1	1	0	5		2	0	1	8		

Transaction ID : SA11AI.208303

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PIERREND, JAVIER, R., ,Mailing Address 45716 Imperial Square
Apt. 402City
SterlingState
VAZip Code
20166FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
ASST. VIDEO PRODUCTIONS COORC

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

594.71

Date of Receipt

M	M	M	D	D	D	Y	Y	Y	Y	Y	Y
1	0		3	1		2	0	1	8		

Transaction ID : SA11AI.206420

Amount of Each Receipt this Period

29.52

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

111.26

X	11a		11b		11c		12		
	13		14		15		16		17

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

FEC Schedule A (Form 3X) Rev. 06/2016

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 973 OF 1411

(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. PISARSKY, KATHY, A., ,

Mailing Address 102 W Shoreway Drive

City
Sandusky

State
OH

Zip Code
44870

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HOSPITAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209781

Amount of Each Receipt this Period

13.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PISARSKY, KATHY, A., ,

Mailing Address 102 W Shoreway Drive

City
Sandusky

State
OH

Zip Code
44870

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HOSPITAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210438

Amount of Each Receipt this Period

13.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PITTS, BRET, L., ,

Mailing Address P.O. Box 4443

City
Sidney

State
OH

Zip Code
45365

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HIGHWAY TECHNICIAN II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

705.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209151

Amount of Each Receipt this Period

35.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

62.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 974 OF 1411

(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. PITTS, BRET, L., ,

Mailing Address P.O. Box 4443

City
Sidney

State
OH

Zip Code
45365

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HIGHWAY TECHNICIAN II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

740.50

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209782

Amount of Each Receipt this Period

35.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PITTS, BRET, L., ,

Mailing Address P.O. Box 4443

City
Sidney

State
OH

Zip Code
45365

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HIGHWAY TECHNICIAN II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

776.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210439

Amount of Each Receipt this Period

35.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PLUGER, JOSEPH, , ,

Mailing Address 605 South Jackson

City
Gardner

State
IL

Zip Code
60424

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

772.79

Date of Receipt

11 / 05 / 2018

Transaction ID : SA11AI.208304

Amount of Each Receipt this Period

77.28

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

148.28

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 975 OF 1411

(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. PLUMMER, DEBORAH, C., ,

Mailing Address 4021 E Street SE

City
Washington

State
DC

Zip Code
20019

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
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
11 / 15 / 2018

Transaction ID : SA11AI.206803

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PLUMMER, JOSEPH, E., ,

Mailing Address 612 N Sherman

City
Lincoln

State
IL

Zip Code
62656

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
CORRECTIONAL OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

389.52

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208305

Amount of Each Receipt this Period

76.92

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PLUNKETT, DARRELL, , ,

Mailing Address 41 E Brayton

City
Chiacgo

State
IL

Zip Code
60628

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
ENGINEERING TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

208.40

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208306

Amount of Each Receipt this Period

20.84

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

107.76

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 976 OF 1411

(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. POINTER, BETHANIE, D., ,

Mailing Address 4524 Mainfield Avenue

City
BaltimoreState
MDZip Code
21214FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1044.25

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206423

Amount of Each Receipt this Period

52.34

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. POINTER, BETHANIE, D., ,

Mailing Address 4524 Mainfield Avenue

City
BaltimoreState
MDZip Code
21214FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1096.59

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	15	2018

Transaction ID : SA11AI.206804

Amount of Each Receipt this Period

52.34

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. POLLARD, NICOLE, R., ,

Mailing Address 9404 Nicklaus Lane

City
LaurelState
MDZip Code
20708FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
EXECUTIVE ASST. TO THE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1483.71

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206425

Amount of Each Receipt this Period

78.09

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

182.77

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 977 OF 1411

(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. POLLARD, NICOLE, R., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 9404 Nicklaus Lane City Laurel State MD Zip Code 20708 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME INT'L Occupation (for Individual) EXECUTIVE ASST. TO THE PRESIDE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 1561.80			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 15 / 2018 Transaction ID : SA11AI.206806 Amount of Each Receipt this Period 78.09 ☐ Memo Item
B. POPE, DONALD, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 312 Colgate Avenue City Elyria State OH Zip Code 44035 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH Occupation (for Individual) ODJFS CUSTOMER SERVICE REP Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 204.00			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 23 / 2018 Transaction ID : SA11AI.210440 Amount of Each Receipt this Period 8.50 ☐ Memo Item
C. POPKE, KRISTEN, B., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 5002 Hartford Avenue City Sandusky State OH Zip Code 44870 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH Occupation (for Individual) ACTIVITIES AIDE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 406.00			Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 26 / 2018 Transaction ID : SA11AI.209153 Amount of Each Receipt this Period 19.00 ☐ Memo Item
SUBTOTAL of Receipts This Page (optional)..... ▶			105.59
TOTAL This Period (last page this line number only)..... ▶			

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 978 OF 1411

(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. POPKE, KRISTEN, B., ,

Mailing Address 5002 Hartford Avenue

City
SanduskyState
OHZip Code
44870FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ACTIVITIES AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209784

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. POPKE, KRISTEN, B., ,

Mailing Address 5002 Hartford Avenue

City
SanduskyState
OHZip Code
44870FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ACTIVITIES AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210441

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. POPOVICI, GREGORY, E., ,

Mailing Address 7381 Clouds Hill Place

City
ManassasState
VAZip Code
20111FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
DATABASE ANALYST III

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	15	2018

Transaction ID : SA11AI.206807

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

48.00

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 979 OF 1411

(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. PORTER, MARY, L., ,

Mailing Address 9800 Bellefontaine Road

City
St. Louis

State
MO

Zip Code
63137

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

INTERNATIONAL UNION REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

881.06

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206427

Amount of Each Receipt this Period

45.48

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PORTER, MARY, L., ,

Mailing Address 9800 Bellefontaine Road

City
St. Louis

State
MO

Zip Code
63137

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

INTERNATIONAL UNION REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

926.54

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206808

Amount of Each Receipt this Period

45.48

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PORTER-RAINES, NAQUETTA, V., ,

Mailing Address 1939 Green Road
Apt. 524

City
Cleveland

State
OH

Zip Code
44121

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210442

Amount of Each Receipt this Period

8.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

99.46

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 980 OF 1411

(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. PORTWOOD, RALPH, D., ,

Mailing Address 300 W Caton Farm
#17

City
Lockport

State
IL

Zip Code
60441

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
CORRECTIONAL OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208307

Amount of Each Receipt this Period

83.34

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PORTWOOD, SHELLIA, F., ,

Mailing Address 8317 Waterburg Drive

City
Joliet

State
IL

Zip Code
60431

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
CORRECTIONS FOOD SERVICE REF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208308

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. POTES-MCCRAE, MYRA, J ., ,

Mailing Address 4652 Talmadge Road
Apt. 3B

City
Toledo

State
OH

Zip Code
43623

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ODJFS CUSTOMER SRVC REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209786

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

134.34

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 981 OF 1411

(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. POTES-MCCRAE, MYRA, J ., ,Mailing Address 4652 Talmadge Road
Apt. 3BCity
ToledoState
OHZip Code
43623FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ODJFS CUSTOMER SRVC REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210443

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. POTTS, EDWARD, , ,

Mailing Address 240 Bentz Mill Road

City
WellsvilleState
PAZip Code
17365FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13Occupation (for Individual)
CLERK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

862.62

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2018

Transaction ID : SA11AI.207121

Amount of Each Receipt this Period

78.42

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. POUND, LYNETTE, , ,

Mailing Address 24 East Metcalf

City
ErieState
PAZip Code
16504FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

408.54

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2018

Transaction ID : SA11AI.207122

Amount of Each Receipt this Period

37.14

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

124.56

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 982 OF 1411

(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. POWELL, CARLISHA, , ,

Mailing Address 3820 Chagrin Blvd.

City
Beachwood

State
OH

Zip Code
44122

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

613.72

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210934

Amount of Each Receipt this Period

57.24

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. POWELL, KEITH, V., ,

Mailing Address 2011 Haig Avenue

City
West Portsmouth

State
OH

Zip Code
45663

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 ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209787

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. POWELL, KEITH, V., ,

Mailing Address 2011 Haig Avenue

City
West Portsmouth

State
OH

Zip Code
45663

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 ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210444

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.24

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 983 OF 1411

(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. POWELL, REBECCA, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 25 / 2018

Transaction ID : SA11AI.207489

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. POWELL, REBECCA, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

735.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207691

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. POWELL, REBECCA, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

770.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207925

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 984 OF 1411

(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. PRATER, JAMES, T., ,

Mailing Address 1833 Bar Harbor Road

City
ColumbusState
OHZip Code
43219FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
MAINTENANCE REPAIR TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M	D D	Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210445

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PRATHER, KAYLA, R., ,

Mailing Address 1630 Friendship Road

City
AberdeenState
OHZip Code
45101FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
FOOD SERVICE WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M	D D	Y Y Y Y
10	26	2018

Transaction ID : SA11AI.209158

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PRATHER, KAYLA, R., ,

Mailing Address 1630 Friendship Road

City
AberdeenState
OHZip Code
45101FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
FOOD SERVICE WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

322.00

Date of Receipt

M M	D D	Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209789

Amount of Each Receipt this Period

14.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

36.50

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 985 OF 1411

(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. PRATHER, KAYLA, R., ,

Mailing Address 1630 Friendship Road

City
Aberdeen

State
OH

Zip Code
45101

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
FOOD SERVICE WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210446

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PRESBERRY, AARON, L., ,

Mailing Address 2212 Foxbourne Road

City
Toledo

State
OH

Zip Code
43614

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
THERAPUTIC PROGRAM WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209159

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PRESBERRY, AARON, L., ,

Mailing Address 2212 Foxbourne Road

City
Toledo

State
OH

Zip Code
43614

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
THERAPUTIC PROGRAM WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

276.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209790

Amount of Each Receipt this Period

12.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

38.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 986 OF 1411

(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. PRESBERRY, AARON, L., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 2212 Foxbourne Road <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: 1px solid black; padding: 2px;">City Toledo</td> <td style="width: 15%; border: 1px solid black; padding: 2px;">State OH</td> <td style="width: 52%; border: 1px solid black; padding: 2px;">Zip Code 43614</td> </tr> </table> FEC ID number of contributing federal political committee. C			City Toledo	State OH	Zip Code 43614	Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 23 / 2018 Transaction ID : SA11AI.210447 Amount of Each Receipt this Period 12.00 ☐ Memo Item
City Toledo	State OH	Zip Code 43614				
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH Occupation (for Individual) THERAPUTIC PROGRAM WORKER Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼			Aggregate Year-to-Date ▼ 288.00			
B. PRESLEY, JEREMY, L., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 127 1/2 S Main Street <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: 1px solid black; padding: 2px;">City London</td> <td style="width: 15%; border: 1px solid black; padding: 2px;">State OH</td> <td style="width: 52%; border: 1px solid black; padding: 2px;">Zip Code 43140</td> </tr> </table> FEC ID number of contributing federal political committee. C			City London	State OH	Zip Code 43140	Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 26 / 2018 Transaction ID : SA11AI.209160 Amount of Each Receipt this Period 10.00 ☐ Memo Item
City London	State OH	Zip Code 43140				
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 ▼ 220.00			
C. PRESLEY, JEREMY, L., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 127 1/2 S Main Street <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: 1px solid black; padding: 2px;">City London</td> <td style="width: 15%; border: 1px solid black; padding: 2px;">State OH</td> <td style="width: 52%; border: 1px solid black; padding: 2px;">Zip Code 43140</td> </tr> </table> FEC ID number of contributing federal political committee. C			City London	State OH	Zip Code 43140	Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 09 / 2018 Transaction ID : SA11AI.209791 Amount of Each Receipt this Period 10.00 ☐ Memo Item
City London	State OH	Zip Code 43140				
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 ▼ 230.00			
SUBTOTAL of Receipts This Page (optional)..... ▶			32.00			
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 987 OF 1411

(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. PRESLEY, JEREMY, L., ,

Mailing Address 127 1/2 S Main Street

City
London

State
OH

Zip Code
43140

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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210448

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PRESTON, NEIL, J., ,

Mailing Address 845 Stinson Court

City
Columbus

State
OH

Zip Code
43214

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
CLAIMS SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209161

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PRESTON, NEIL, J., ,

Mailing Address 845 Stinson Court

City
Columbus

State
OH

Zip Code
43214

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
CLAIMS SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

276.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209792

Amount of Each Receipt this Period

12.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

34.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 988 OF 1411

(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. PRESTON, NEIL, J., ,

Mailing Address 845 Stinson Court

City
Columbus

State
OH

Zip Code
43214

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
CLAIMS SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210449

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PRESTON, SHIRLEY, D., ,

Mailing Address 2832 Scottwood Avenue

City
Toledo

State
OH

Zip Code
43610

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 ▼

319.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209162

Amount of Each Receipt this Period

14.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PRESTON, SHIRLEY, D., ,

Mailing Address 2832 Scottwood Avenue

City
Toledo

State
OH

Zip Code
43610

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 ▼

333.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209793

Amount of Each Receipt this Period

14.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

41.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 989 OF 1411

(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. PRESTON, SHIRLEY, D., , Mailing Address 2832 Scottwood Avenue <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">City Toledo</td> <td style="width: 16%;">State OH</td> <td style="width: 51%;">Zip Code 43610</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH</td> <td style="width: 67%;">Occupation (for Individual) CORRECTION OFFICER</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 348.00			City Toledo	State OH	Zip Code 43610	Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) CORRECTION OFFICER	Date of Receipt <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">M M / D D / Y Y Y Y Y 11 / 23 / 2018</td> </tr> </table> Transaction ID : SA11AI.210450 Amount of Each Receipt this Period 14.50 ☐ Memo Item		M M / D D / Y Y Y Y Y 11 / 23 / 2018
City Toledo	State OH	Zip Code 43610								
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) CORRECTION OFFICER									
M M / D D / Y Y Y Y Y 11 / 23 / 2018										
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. PRICE, BRYAN, C., , Mailing Address 3923 Nassau Court <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">City Youngstown</td> <td style="width: 16%;">State OH</td> <td style="width: 51%;">Zip Code 44511</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH</td> <td style="width: 67%;">Occupation (for Individual) STOREKEEPER II</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 204.00			City Youngstown	State OH	Zip Code 44511	Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) STOREKEEPER II	Date of Receipt <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">M M / D D / Y Y Y Y Y 11 / 23 / 2018</td> </tr> </table> Transaction ID : SA11AI.210451 Amount of Each Receipt this Period 8.50 ☐ Memo Item		M M / D D / Y Y Y Y Y 11 / 23 / 2018
City Youngstown	State OH	Zip Code 44511								
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) STOREKEEPER II									
M M / D D / Y Y Y Y Y 11 / 23 / 2018										
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. PRICE, CHAZ, D., , Mailing Address 606 Brace Avenue <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">City Mansfield</td> <td style="width: 16%;">State OH</td> <td style="width: 51%;">Zip Code 44905</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH</td> <td style="width: 67%;">Occupation (for Individual) CORRECTION OFFICER</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) Aggregate Year-to-Date ▼ 204.00			City Mansfield	State OH	Zip Code 44905	Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) CORRECTION OFFICER	Date of Receipt <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">M M / D D / Y Y Y Y Y 11 / 23 / 2018</td> </tr> </table> Transaction ID : SA11AI.210452 Amount of Each Receipt this Period 8.50 ☐ Memo Item		M M / D D / Y Y Y Y Y 11 / 23 / 2018
City Mansfield	State OH	Zip Code 44905								
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) CORRECTION OFFICER									
M M / D D / Y Y Y Y Y 11 / 23 / 2018										
SUBTOTAL of Receipts This Page (optional)..... ▶			31.50							
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 990 OF 1411

(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. PRICE, DAVID, L., ,

Mailing Address 5256 Evelyn Drive

City

Garfield Height

State

OH

Zip Code

44125

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

MAINTENANCE REPAIR TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209165

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PRICE, DAVID, L., ,

Mailing Address 5256 Evelyn Drive

City

Garfield Height

State

OH

Zip Code

44125

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

MAINTENANCE REPAIR TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209796

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PRICE, DAVID, L., ,

Mailing Address 5256 Evelyn Drive

City

Garfield Height

State

OH

Zip Code

44125

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

MAINTENANCE REPAIR TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210453

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

39.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 991 OF 1411

(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. PRICE, ROBYN, , ,

Mailing Address 1034 N. Washington Avenue

City
Lansing

State
MI

Zip Code
48906

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MI CN 25

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211345

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PRICE, ROBYN, , ,

Mailing Address 1034 N. Washington Avenue

City
Lansing

State
MI

Zip Code
48906

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MI CN 25

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 20 / 2018

Transaction ID : SA11AI.211396

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PRICHARD, DIANNA, K., ,

Mailing Address 35 Caliente Avenue

City
Bartonville

State
IL

Zip Code
61607

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL RET CHPT 31

Occupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

833.40

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208397

Amount of Each Receipt this Period

83.34

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

133.34

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 992 OF 1411

(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. PRICHARD, JAMES, A., ,

Mailing Address 35 Caliente Avenue

City
BartonvilleState
ILZip Code
61607FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL RET CHPT 31Occupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.40

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208398

Amount of Each Receipt this Period

83.34

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PROUTY, ALYSON, , ,

Mailing Address 4651 Vibert Road

City
SaginawState
MNZip Code
55779FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MNOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	01	2018

Transaction ID : SA11AI.211751

Amount of Each Receipt this Period

32.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PUGH, RICHARD, B., ,

Mailing Address 824 Burch Avenue

City
LimaState
OHZip Code
45801FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
STOREKEEPER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

200.10

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209797

Amount of Each Receipt this Period

8.70

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

124.04

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 993 OF 1411

(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. PUGH, RICHARD, B., ,

Mailing Address 824 Burch Avenue

City
Lima

State
OH

Zip Code
45801

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
STOREKEEPER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.80

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210454

Amount of Each Receipt this Period

8.70

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PYLES, HEATHER, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 09 / 2018

Transaction ID : SA11AI.207692

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PYLES, HEATHER, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 26 / 2018

Transaction ID : SA11AI.207926

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

28.70

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 994 OF 1411

(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. QUALLS, NATALIE, L., ,

Mailing Address 1575 Coronet Drive

City
Columbus

State
OH

Zip Code
43224

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
SENIOR FINANCIAL ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209167

Amount of Each Receipt this Period

17.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. QUALLS, NATALIE, L., ,

Mailing Address 1575 Coronet Drive

City
Columbus

State
OH

Zip Code
43224

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
SENIOR FINANCIAL ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

402.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209798

Amount of Each Receipt this Period

17.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. QUALLS, NATALIE, L., ,

Mailing Address 1575 Coronet Drive

City
Columbus

State
OH

Zip Code
43224

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
SENIOR FINANCIAL ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210455

Amount of Each Receipt this Period

17.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

52.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 995 OF 1411

(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. QUAST, EMILIE, J., ,

Mailing Address 1819 Talmage Avenue SE

 City
 Minneapolis

 State
 MN

 Zip Code
 55414

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME MN CN 5/STATE OF MN

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.211752

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. QUESADA, DIANA, , ,

Mailing Address 334 Marguerite Street

 City
 Elgin

 State
 IL

 Zip Code
 60123

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME IL CN 31/STATE OF IL

 Occupation (for Individual)
 REIMBURSEMENT OFFICE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.208309

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. QUICK, ANGELA, D., ,

Mailing Address 910 Campground Road

 City
 Anna

 State
 IL

 Zip Code
 62906

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME IL CN 31/STATE OF IL

 Occupation (for Individual)
 MENTAL HEALTH TECH I

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.208310

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 996 OF 1411

(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. QUICK, CARY, R., , Jr.

Mailing Address 910 Campground Road

City
Anna

State
IL

Zip Code
62906

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
RESIDENTIAL SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208311

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. QUINN, SARAH, , ,

Mailing Address 370 S Highland
#15

City
Pittsburgh

State
PA

Zip Code
15206

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/NSP/LOCAL 2719

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207124

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. QUIRANTE, CHARITY, B., ,

Mailing Address 3939 Innovator Drive

City
Sacramento

State
CA

Zip Code
95834

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
POLITICAL ACTION POLLING ASSIST.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

829.88

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206428

Amount of Each Receipt this Period

41.75

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

103.75

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 997 OF 1411

(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. QUIRANTE, CHARITY, B., ,

Mailing Address 3939 Innovator Drive

City
Sacramento

State
CA

Zip Code
95834

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

POLITICAL ACTION POLLING ASSIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

871.63

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206809

Amount of Each Receipt this Period

41.75

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. QUIROGA, JESSE, J., ,

Mailing Address 502 W. Maple Street

City
Deshler

State
OH

Zip Code
43516

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

ADMINISTRATIVE PROFESSIONAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209168

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. QUIROGA, JESSE, J., ,

Mailing Address 502 W. Maple Street

City
Deshler

State
OH

Zip Code
43516

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

ADMINISTRATIVE PROFESSIONAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209799

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

61.75

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 998 OF 1411

(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. QUIROGA, JESSE, J., ,

Mailing Address 502 W. Maple Street

City
DeshlerState
OHZip Code
43516FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ADMINISTRATIVE PROFESSIONAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210456

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RABON, SHARON, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2018

Transaction ID : SA11AI.207491

Amount of Each Receipt this Period

17.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RABON, SHARON, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

357.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.207693

Amount of Each Receipt this Period

17.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

44.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 999 OF 1411
(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. RABON, SHARON, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 1212 Jefferson Street SE <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: 1px solid black; padding: 2px;">City Olympia</td> <td style="width: 15%; border: 1px solid black; padding: 2px;">State WA</td> <td style="width: 52%; border: 1px solid black; padding: 2px;">Zip Code 98501</td> </tr> </table> FEC ID number of contributing federal political committee. C <table style="width: 100%; border: none;"> <tr> <td style="width: 40%; border: 1px solid black; padding: 2px;">Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA</td> <td style="width: 60%; border: 1px solid black; padding: 2px;">Occupation (for Individual) STAFF REPRESENTATIVE</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 374.00			City Olympia	State WA	Zip Code 98501	Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA	Occupation (for Individual) STAFF REPRESENTATIVE	Date of Receipt M M / D D / Y Y Y Y Y Y 11 26 2018 Transaction ID : SA11AI.207927 Amount of Each Receipt this Period 17.00 ☐ Memo Item
City Olympia	State WA	Zip Code 98501						
Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA	Occupation (for Individual) STAFF REPRESENTATIVE							
B. RADAKOVITS, ANNE, M., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 421 Bridge Street <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: 1px solid black; padding: 2px;">City Catasauqua</td> <td style="width: 15%; border: 1px solid black; padding: 2px;">State PA</td> <td style="width: 52%; border: 1px solid black; padding: 2px;">Zip Code 18032</td> </tr> </table> FEC ID number of contributing federal political committee. C <table style="width: 100%; border: none;"> <tr> <td style="width: 40%; border: 1px solid black; padding: 2px;">Name of Employer (for Individual) AFSCME PA CN 13</td> <td style="width: 60%; border: 1px solid black; padding: 2px;">Occupation (for Individual) STAFF REPRESENTATIVE</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00			City Catasauqua	State PA	Zip Code 18032	Name of Employer (for Individual) AFSCME PA CN 13	Occupation (for Individual) STAFF REPRESENTATIVE	Date of Receipt M M / D D / Y Y Y Y Y Y 10 31 2018 Transaction ID : SA11AI.207125 Amount of Each Receipt this Period 20.00 ☐ Memo Item
City Catasauqua	State PA	Zip Code 18032						
Name of Employer (for Individual) AFSCME PA CN 13	Occupation (for Individual) STAFF REPRESENTATIVE							
C. RADAKOVITS, ANNE, M., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 421 Bridge Street <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: 1px solid black; padding: 2px;">City Catasauqua</td> <td style="width: 15%; border: 1px solid black; padding: 2px;">State PA</td> <td style="width: 52%; border: 1px solid black; padding: 2px;">Zip Code 18032</td> </tr> </table> FEC ID number of contributing federal political committee. C <table style="width: 100%; border: none;"> <tr> <td style="width: 40%; border: 1px solid black; padding: 2px;">Name of Employer (for Individual) AFSCME PA CN 13</td> <td style="width: 60%; border: 1px solid black; padding: 2px;">Occupation (for Individual) STAFF REPRESENTATIVE</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) Aggregate Year-to-Date ▼ 240.00			City Catasauqua	State PA	Zip Code 18032	Name of Employer (for Individual) AFSCME PA CN 13	Occupation (for Individual) STAFF REPRESENTATIVE	Date of Receipt M M / D D / Y Y Y Y Y Y 11 08 2018 Transaction ID : SA11AI.207126 Amount of Each Receipt this Period 20.00 ☐ Memo Item
City Catasauqua	State PA	Zip Code 18032						
Name of Employer (for Individual) AFSCME PA CN 13	Occupation (for Individual) STAFF REPRESENTATIVE							
SUBTOTAL of Receipts This Page (optional)..... ▶			 57.00					
TOTAL This Period (last page this line number only)..... ▶			 					

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1000 OF 1411

(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. RAINES, DAVID, , ,

Mailing Address PO Box 126

City

Bucoda

State

WA

Zip Code

98530

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	25	2018

Transaction ID : SA11AI.207492

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RAINES, DAVID, , ,

Mailing Address PO Box 126

City

Bucoda

State

WA

Zip Code

98530

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.50

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.207694

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RAINES, DAVID, , ,

Mailing Address PO Box 126

City

Bucoda

State

WA

Zip Code

98530

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	26	2018

Transaction ID : SA11AI.207928

Amount of Each Receipt this Period

10.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

31.50

TOTAL This Period (last page this line number only)..... ►

X	11a		11b		11c		12		
	13		14		15		16		17

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

FEC Schedule A (Form 3X) Rev. 06/2016

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1002 OF 1411

(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. RAMMELL, KELLY, , ,

Mailing Address 420 S Sugar Street

City
Saint Louisville

State
OH

Zip Code
43071

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
CLERK III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209800

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RAMMELL, KELLY, , ,

Mailing Address 420 S Sugar Street

City
Saint Louisville

State
OH

Zip Code
43071

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
CLERK III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210457

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RANA, SHAWNTAE', R., ,

Mailing Address 1353 Talcott Place

City
Decatur

State
GA

Zip Code
30033

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
FIELD ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

528.64

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206429

Amount of Each Receipt this Period

27.48

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

47.48

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1003 OF 1411

(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. RANA, SHAWNTAE', R., ,

Mailing Address 1353 Talcott Place

City
Decatur

State
GA

Zip Code
30033

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

FIELD ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

556.12

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206810

Amount of Each Receipt this Period

27.48

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RANDLEMAN, TIERRA, L., ,

Mailing Address 1432 Hayes Avenue

City
Sandusky

State
OH

Zip Code
44870

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HOSPITAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209801

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RANDLEMAN, TIERRA, L., ,

Mailing Address 1432 Hayes Avenue

City
Sandusky

State
OH

Zip Code
44870

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HOSPITAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210458

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.48

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1004 OF 1411

(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. RANDOLPH, JOHN, , ,

Mailing Address 323 60th Street SE

City
Everett

State
WA

Zip Code
98203

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 25 / 2018

Transaction ID : SA11AI.207493

Amount of Each Receipt this Period

15.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RANDOLPH, JOHN, , ,

Mailing Address 323 60th Street SE

City
Everett

State
WA

Zip Code
98203

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207695

Amount of Each Receipt this Period

15.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RANDOLPH, JOHN, , ,

Mailing Address 323 60th Street SE

City
Everett

State
WA

Zip Code
98203

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

341.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207929

Amount of Each Receipt this Period

15.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

46.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1005 OF 1411

(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. RATHJEN, JEANNETTE, , ,

Mailing Address 3457 I Street

City
EurekaState
CAZip Code
95503FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA CN 57Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		2	4		2	0	1	8		

Transaction ID : SA11AI.211243

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RAY, SHERYL, D., ,

Mailing Address 5424 Englecrest Drive

City
Canal WinchesterState
OHZip Code
43110FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CUSTOMER SERVICES ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

407.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		2	6		2	0	1	8		

Transaction ID : SA11AI.209171

Amount of Each Receipt this Period

18.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RAY, SHERYL, D., ,

Mailing Address 5424 Englecrest Drive

City
Canal WinchesterState
OHZip Code
43110FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CUSTOMER SERVICES ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		0	9		2	0	1	8		

Transaction ID : SA11AI.209802

Amount of Each Receipt this Period

18.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

57.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1006 OF 1411

(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. RAY, SHERYL, D., ,

Mailing Address 5424 Englecrest Drive

City

Canal Winchester

State

OH

Zip Code

43110

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

CUSTOMER SERVICES ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.00

Date of Receipt

M M	D D	Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210459

Amount of Each Receipt this Period

18.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RAYNER, ZOLLIE, , ,

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 (for Individual)

AFSCME PA CN 13

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1377.64

Date of Receipt

M M	D D	Y Y Y Y
11	08	2018

Transaction ID : SA11AI.207128

Amount of Each Receipt this Period

125.24

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. REAMES, CINDY, LEE, ,

Mailing Address 8221 S. Brayton Road

City

Medical Lake

State

WA

Zip Code

99022

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28/SOWA

Occupation (for Individual)

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
11	09	2018

Transaction ID : SA11AI.207696

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

153.74

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1007 OF 1411

(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. REAMES, CINDY, LEE, ,

Mailing Address 8221 S. Brayton Road

City
Medical LakeState
WAZip Code
99022FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/SOWAOccupation (for Individual)
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
11			26			2018			

Transaction ID : SA11AI.207930

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. REED, DENISE, , ,

Mailing Address 1394 Brookforest Drive

City
ColumbusState
OHZip Code
43204FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
EDUCATION SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2018			

Transaction ID : SA11AI.209172

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. REED, DENISE, , ,

Mailing Address 1394 Brookforest Drive

City
ColumbusState
OHZip Code
43204FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
EDUCATION SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			09			2018			

Transaction ID : SA11AI.209803

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

40.00

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 1008 OF 1411

(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. REED, DENISE, , , Mailing Address 1394 Brookforest Drive <table border="1"> <tr> <td>City Columbus</td> <td>State OH</td> <td>Zip Code 43204</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1"> <tr> <td>Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH</td> <td>Occupation (for Individual) EDUCATION SPECIALIST</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00			City Columbus	State OH	Zip Code 43204	Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) EDUCATION SPECIALIST	Date of Receipt 11 / 23 / 2018 Transaction ID : SA11AI.210460 Amount of Each Receipt this Period 15.00 ☐ Memo Item	
City Columbus	State OH	Zip Code 43204							
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) EDUCATION SPECIALIST								
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. REED, MARLON, A., , Mailing Address 6805 Mayfield Road <table border="1"> <tr> <td>City Mayfield Hts</td> <td>State OH</td> <td>Zip Code 44124</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1"> <tr> <td>Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH</td> <td>Occupation (for Individual) THERAPUTIC PROGRAM TECHNICIA</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 207.00			City Mayfield Hts	State OH	Zip Code 44124	Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) THERAPUTIC PROGRAM TECHNICIA	Date of Receipt 11 / 09 / 2018 Transaction ID : SA11AI.209804 Amount of Each Receipt this Period 9.00 ☐ Memo Item	
City Mayfield Hts	State OH	Zip Code 44124							
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) THERAPUTIC PROGRAM TECHNICIA								
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. REED, MARLON, A., , Mailing Address 6805 Mayfield Road <table border="1"> <tr> <td>City Mayfield Hts</td> <td>State OH</td> <td>Zip Code 44124</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1"> <tr> <td>Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH</td> <td>Occupation (for Individual) THERAPUTIC PROGRAM TECHNICIA</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) Aggregate Year-to-Date ▼ 216.00			City Mayfield Hts	State OH	Zip Code 44124	Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) THERAPUTIC PROGRAM TECHNICIA	Date of Receipt 11 / 23 / 2018 Transaction ID : SA11AI.210461 Amount of Each Receipt this Period 9.00 ☐ Memo Item	
City Mayfield Hts	State OH	Zip Code 44124							
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) THERAPUTIC PROGRAM TECHNICIA								
SUBTOTAL of Receipts This Page (optional)..... ▶			33.00						
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 1009 OF 1411

(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. REED, RICKY, E., ,

Mailing Address 9733 Linwood Road

City

La Rue

State

OH

Zip Code

43332

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209174

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. REED, RICKY, E., ,

Mailing Address 9733 Linwood Road

City

La Rue

State

OH

Zip Code

43332

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 ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209805

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. REED, RICKY, E., ,

Mailing Address 9733 Linwood Road

City

La Rue

State

OH

Zip Code

43332

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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210462

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1010 OF 1411

(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. REED, ROBERT, W., ,

Mailing Address 63 Bovet Rd
#206

City
San Mateo

State
CA

Zip Code
94402

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA CN 57

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211244

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. REEDER, DAWN, R ., ,

Mailing Address 3203 Retriever Road

City
Columbus

State
OH

Zip Code
43232

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
CUSTOMER SVC ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210463

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. REES, JOHN, , ,

Mailing Address 104 Parade

City
Castle Hills

State
TX

Zip Code
78213

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ORGANIZER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

781.64

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206431

Amount of Each Receipt this Period

36.65

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.15

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1011 OF 1411

(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. REES, JOHN, , ,

Mailing Address 104 Parade

City

Castle Hills

State

TX

Zip Code

78213

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ORGANIZER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

818.29

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2018

Transaction ID : SA11AI.206812

Amount of Each Receipt this Period

36.65

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. REESE, DEIDRA, , ,

Mailing Address 6314 Downing Lane

City

Gahanna

State

OH

Zip Code

43230

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH CN 8

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2018

Transaction ID : SA11AI.210935

Amount of Each Receipt this Period

20.84

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. REESE, TONYA, L., ,

Mailing Address 9313 Huggins Lane

City

Reynoldsburg

State

OH

Zip Code

43068

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

UNEMPLOYMENT COMPENS REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210464

Amount of Each Receipt this Period

8.50

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

65.99

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 1012 OF 1411

(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. REEVES, GABRIELLA, , ,

Mailing Address 4064 Elaine Park Drive

City
Columbus

State
OH

Zip Code
43227

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
CHILDREN'S TEACHER AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209808

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. REEVES, GABRIELLA, , ,

Mailing Address 4064 Elaine Park Drive

City
Columbus

State
OH

Zip Code
43227

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
CHILDREN'S TEACHER AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210465

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. REEVES, STEVEN, A., ,

Mailing Address 107 S Wolfe Road

City
Port Clinton

State
OH

Zip Code
43452

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HOSPITAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209809

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

27.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 1013 OF 1411

(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. REEVES, STEVEN, A., ,

Mailing Address 107 S Wolfe Road

City

Port Clinton

State

OH

Zip Code

43452

FEC ID number of contributing
federal political committee.

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

HOSPITAL AIDE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210466

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. REGAN, MARILYN, , ,

Mailing Address 4031 Executive Park Drive

City

Harrisburg

State

PA

Zip Code

17111

FEC ID number of contributing
federal political committee.

Name of Employer (for Individual)

AFSCME PA CN 13

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2018

Transaction ID : SA11AI.207129

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. REGENSTREIF, STEPHEN, , ,

Mailing Address 3214 38th Street NW

City

Washington

State

DC

Zip Code

20016

FEC ID number of contributing
federal political committee.

Name of Employer (for Individual)

AFSCME INT'L/STATE STREET

Occupation (for Individual)

RETIREE

Receipt For:

☐ Primary
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2018

Transaction ID : SA11AI.206813

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1014 OF 1411

(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. REHKOPF, CRAIG, E., ,

Mailing Address 1050 Leith Street

City
Maumee

State
OH

Zip Code
43537

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
INFORMATION TECHNOLOGY TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209179

Amount of Each Receipt this Period

12.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. REHKOPF, CRAIG, E., ,

Mailing Address 1050 Leith Street

City
Maumee

State
OH

Zip Code
43537

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
INFORMATION TECHNOLOGY TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209810

Amount of Each Receipt this Period

12.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. REHKOPF, CRAIG, E., ,

Mailing Address 1050 Leith Street

City
Maumee

State
OH

Zip Code
43537

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
INFORMATION TECHNOLOGY TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210467

Amount of Each Receipt this Period

12.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

37.50

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 1015 OF 1411

(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. REMPFER, SUSAN, J. , ,

Mailing Address 1812 West Road Drive

City
Springfield

State
IL

Zip Code
62711

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
DISABILITY CLAIMS REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208313

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. REYES, VICTOR, , ,

Mailing Address 28 Bradley Ln

City
Antioch

State
CA

Zip Code
94509

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA CN 57

Occupation (for Individual)
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
10 / 24 / 2018

Transaction ID : SA11AI.211245

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. REYNA, ANITA, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 25 / 2018

Transaction ID : SA11AI.207495

Amount of Each Receipt this Period

14.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

64.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1016 OF 1411

(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. REYNA, ANITA, , , Mailing Address 1212 Jefferson Street SE City Olympia State WA Zip Code 98501 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 294.00			Date of Receipt M M / D D / Y Y Y Y Y 11 / 09 / 2018 Transaction ID : SA11AI.207697 Amount of Each Receipt this Period 14.00 ☐ Memo Item	
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. REYNA, ANITA, , , Mailing Address 1212 Jefferson Street SE City Olympia State WA Zip Code 98501 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 308.00			Date of Receipt M M / D D / Y Y Y Y Y 11 / 26 / 2018 Transaction ID : SA11AI.207931 Amount of Each Receipt this Period 14.00 ☐ Memo Item	
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. REYNOLDS, ROBERTA, , , Mailing Address 1212 Jefferson Street SE City Olympia State WA Zip Code 98501 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA Occupation (for Individual) 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 11 / 09 / 2018 Transaction ID : SA11AI.207698 Amount of Each Receipt this Period 10.00 ☐ Memo Item	
SUBTOTAL of Receipts This Page (optional)..... ▶			38.00	
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 1017 OF 1411

(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. REYNOLDS, ROBERTA, , ,

Mailing Address 1212 Jefferson Street SE

 City
 Olympia

 State
 WA

 Zip Code
 98501

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	D D	Y Y Y Y
11	26	2018

Transaction ID : SA11AI.207932

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. REYNOLDS, STEPHANIE, L., ,

Mailing Address 2716 Garbett Street

 City
 McKeesport

 State
 PA

 Zip Code
 15132

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME PA CN 13/STATE OF PA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	D D	Y Y Y Y
10	31	2018

Transaction ID : SA11AI.207130

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RHODES, HARRY, , ,

Mailing Address 4031 Executive Park Drive

 City
 Harrisburg

 State
 PA

 Zip Code
 17111

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME PA CN 13

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	D D	Y Y Y Y
11	08	2018

Transaction ID : SA11AI.207131

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1018 OF 1411

(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. RICCI, TIFFANY, A., ,

Mailing Address 1514 Hamilton Street NW

City
Washington

State
DC

Zip Code
20011

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

FIELD COMMUNICATIONS MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1206.02

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206432

Amount of Each Receipt this Period

61.03

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RICCI, TIFFANY, A., ,

Mailing Address 1514 Hamilton Street NW

City
Washington

State
DC

Zip Code
20011

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

FIELD COMMUNICATIONS MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1267.05

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206814

Amount of Each Receipt this Period

61.03

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RICE, CATHY, E., ,

Mailing Address 703 S Main Street

City
Baltimore

State
OH

Zip Code
43105

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

NETWORK SERVICES TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209180

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

132.06

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 1019 OF 1411

(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. RICE, CATHY, E., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 703 S Main Street <table style="width: 100%;"> <tr> <td style="width: 33%;">City Baltimore</td> <td style="width: 15%;">State OH</td> <td style="width: 52%;">Zip Code 43105</td> </tr> </table> FEC ID number of contributing federal political committee. C <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH</td> <td style="width: 67%;">Occupation (for Individual) NETWORK SERVICES TECHNICIAN</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 230.00			City Baltimore	State OH	Zip Code 43105	Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) NETWORK SERVICES TECHNICIAN	Date of Receipt M M / D D / Y Y Y Y Y 11 / 09 / 2018 Transaction ID : SA11AI.209811 Amount of Each Receipt this Period 10.00 ☐ Memo Item
City Baltimore	State OH	Zip Code 43105						
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) NETWORK SERVICES TECHNICIAN							
B. RICE, CATHY, E., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 703 S Main Street <table style="width: 100%;"> <tr> <td style="width: 33%;">City Baltimore</td> <td style="width: 15%;">State OH</td> <td style="width: 52%;">Zip Code 43105</td> </tr> </table> FEC ID number of contributing federal political committee. C <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH</td> <td style="width: 67%;">Occupation (for Individual) NETWORK SERVICES TECHNICIAN</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00			City Baltimore	State OH	Zip Code 43105	Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) NETWORK SERVICES TECHNICIAN	Date of Receipt M M / D D / Y Y Y Y Y 11 / 23 / 2018 Transaction ID : SA11AI.210469 Amount of Each Receipt this Period 10.00 ☐ Memo Item
City Baltimore	State OH	Zip Code 43105						
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) NETWORK SERVICES TECHNICIAN							
C. RICE, DEEARNST, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 2758 England Avenue <table style="width: 100%;"> <tr> <td style="width: 33%;">City Dayton</td> <td style="width: 15%;">State OH</td> <td style="width: 52%;">Zip Code 45406</td> </tr> </table> FEC ID number of contributing federal political committee. C <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH</td> <td style="width: 67%;">Occupation (for Individual) CORRECTION OFFICER</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) Aggregate Year-to-Date ▼ 484.00			City Dayton	State OH	Zip Code 45406	Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) CORRECTION OFFICER	Date of Receipt M M / D D / Y Y Y Y Y 10 / 26 / 2018 Transaction ID : SA11AI.209181 Amount of Each Receipt this Period 22.00 ☐ Memo Item
City Dayton	State OH	Zip Code 45406						
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) CORRECTION OFFICER							
SUBTOTAL of Receipts This Page (optional)..... ▶			 42.00					
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 1020 OF 1411

(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. RICE, DEEARNEST, , ,

Mailing Address 2758 England Avenue

City
Dayton

State
OH

Zip Code
45406

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 ▼

506.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209812

Amount of Each Receipt this Period

22.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RICE, DEEARNEST, , ,

Mailing Address 2758 England Avenue

City
Dayton

State
OH

Zip Code
45406

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 ▼

528.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210470

Amount of Each Receipt this Period

22.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RICE-LOZENSKY, COLLEN, M., ,

Mailing Address 4510 SW Austin Street

City
Seattle

State
WA

Zip Code
98136

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 25 / 2018

Transaction ID : SA11AI.207497

Amount of Each Receipt this Period

10.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

54.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1021 OF 1411

(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. RICE-LOZENSKY, COLLEN, M., ,

Mailing Address 4510 SW Austin Street

City
SeattleState
WAZip Code
98136FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.50

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.207699

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RICE-LOZENSKY, COLLEN, M., ,

Mailing Address 4510 SW Austin Street

City
SeattleState
WAZip Code
98136FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	26	2018

Transaction ID : SA11AI.207933

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RICH, PATTY, D., ,

Mailing Address 390 Worthington Road

City
WestervilleState
OHZip Code
43082FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	06	2018

Transaction ID : SA11AI.210471

Amount of Each Receipt this Period

29.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

50.00

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 1022 OF 1411

(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. RICHARDS, DEANNA, A., ,

Mailing Address P.O. Box 18572

City
Philadelphia

State
PA

Zip Code
19129

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

EDUCATION COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.95

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206433

Amount of Each Receipt this Period

32.73

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RICHARDS, DEANNA, A., ,

Mailing Address P.O. Box 18572

City
Philadelphia

State
PA

Zip Code
19129

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

EDUCATION COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

673.68

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206815

Amount of Each Receipt this Period

32.73

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RICHARDS, TONYIA, M., ,

Mailing Address 3434 Partridge Place
Apt. 207

City
Columbus

State
OH

Zip Code
43231

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

CLERK III

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209182

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.46

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1023 OF 1411

(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. RICHARDS, TONYIA, M., ,

Mailing Address 3434 Partridge Place
Apt. 207

City
Columbus

State
OH

Zip Code
43231

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
CLERK III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209813

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RICHARDS, TONYIA, M., ,

Mailing Address 3434 Partridge Place
Apt. 207

City
Columbus

State
OH

Zip Code
43231

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
CLERK III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210472

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RICHARDSON, JAMES, I., ,

Mailing Address 200 Fernwood Avenue

City
Dayton

State
OH

Zip Code
45405

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 ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209183

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 1024 OF 1411

(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. RICHARDSON, JAMES, I., ,

Mailing Address 200 Fernwood Avenue

 City
 Dayton

 State
 OH

 Zip Code
 45405

 FEC ID number of contributing
 federal political committee.

 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 ▼

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209814

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RICHARDSON, JAMES, I., ,

Mailing Address 200 Fernwood Avenue

 City
 Dayton

 State
 OH

 Zip Code
 45405

 FEC ID number of contributing
 federal political committee.

 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 ▼

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210473

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RICHARDSON, SHAWN, E., ,

Mailing Address 6688 Markwood Street

 City
 Worthington

 State
 OH

 Zip Code
 43085

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 TRANSPORTATION TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.209184

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1025 OF 1411

(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. RICHARDSON, SHAWN, E., ,

Mailing Address 6688 Markwood Street

City
WorthingtonState
OHZip Code
43085FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
TRANSPORTATION TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

920.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209815

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RICHARDSON, SHAWN, E., ,

Mailing Address 6688 Markwood Street

City
WorthingtonState
OHZip Code
43085FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
TRANSPORTATION TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210474

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RICHARDSON, THOMAS, J., ,

Mailing Address 786 Lincoln Avenue

City
Saint PaulState
MNZip Code
55105FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MNOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	01	2018

Transaction ID : SA11AI.211753

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

100.00

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 1026 OF 1411

(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. RIDER, MICHELLE, , ,

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 ▼

418.48

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207132

Amount of Each Receipt this Period

39.22

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RIDLEY, BRUCE, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
10 / 25 / 2018

Transaction ID : SA11AI.207498

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RIDLEY, BRUCE, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207700

Amount of Each Receipt this Period

10.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

60.22

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1027 OF 1411

(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. RIDLEY, BRUCE, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF 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
11 / 26 / 2018

Transaction ID : SA11AI.207934

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RIEDLINGER, JOSEPH, E., ,

Mailing Address 383 Rosewood Drive

City
Marion

State
OH

Zip Code
43302

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
AUTOMOTIVE TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.10

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209816

Amount of Each Receipt this Period

8.70

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RIEDLINGER, JOSEPH, E., ,

Mailing Address 383 Rosewood Drive

City
Marion

State
OH

Zip Code
43302

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
AUTOMOTIVE TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

208.80

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210475

Amount of Each Receipt this Period

8.70

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

27.90

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1028 OF 1411

(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. RIEMATH, JOHN, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.207701

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RIEMATH, JOHN, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2018

Transaction ID : SA11AI.207935

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RIETMAN, TAMARA, L., ,

Mailing Address 207 E Cleveland

City
LaddState
ILZip Code
61329FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
STOREKEEPER I

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

437.43

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

Transaction ID : SA11AI.208315

Amount of Each Receipt this Period

41.66

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

61.66

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 1029 OF 1411

(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. RIGBY, PAMELA, M., ,

Mailing Address 219 North Locust Point Road

City
Mechanicsburg

State
PA

Zip Code
17050

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/NSP/LOCAL 2800

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207133

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RILEY, CRYSTAL, , ,

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 ▼

470.20

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207134

Amount of Each Receipt this Period

45.40

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RIMM, DOROTHY, H., ,

Mailing Address 1926 Prairie square
#104

City
Schaumburg

State
IL

Zip Code
60173

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
EXEC SECRETARY I

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

208.40

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208316

Amount of Each Receipt this Period

31.26

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

86.66

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1030 OF 1411

(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. RING, JOY, L., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 1334 Haloa Drive City Honolulu State HI Zip Code 96818 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME HI LOC 152 Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 1100.00			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 01 / 2018 Transaction ID : SA11AI.211015 Amount of Each Receipt this Period 100.00 ☐ Memo Item
B. RIPLEY, LONNIE, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 1212 Jefferson Street SE City Olympia State WA Zip Code 98501 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00			Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 25 / 2018 Transaction ID : SA11AI.207500 Amount of Each Receipt this Period 12.00 ☐ Memo Item
C. RIPLEY, LONNIE, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 1212 Jefferson Street SE City Olympia State WA Zip Code 98501 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA Occupation (for Individual) 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 Y 11 / 09 / 2018 Transaction ID : SA11AI.207702 Amount of Each Receipt this Period 12.00 ☐ Memo Item
SUBTOTAL of Receipts This Page (optional).....			124.00
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 1031 OF 1411

(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. RIPLEY, LONNIE, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207936

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RISINGER, TAMMY, K., ,

Mailing Address 362 Vernon Road

City
Mansfield

State
OH

Zip Code
44905

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 ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209186

Amount of Each Receipt this Period

18.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RISINGER, TAMMY, K., ,

Mailing Address 362 Vernon Road

City
Mansfield

State
OH

Zip Code
44905

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 ▼

366.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209817

Amount of Each Receipt this Period

18.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

48.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1032 OF 1411

(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. RISINGER, TAMMY, K., ,

Mailing Address 362 Vernon Road

City
MansfieldState
OHZip Code
44905FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210477

Amount of Each Receipt this Period

18.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RISPOLI, AMY, L., ,

Mailing Address 138 Terrace North Lane

City
New CastleState
PAZip Code
16105FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/NSP/LOCAL 2902Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	08	2018

Transaction ID : SA11AI.207135

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RITCHIE, DOUGLAS, B., ,

Mailing Address 4952 337th Avenue Northeast

City
CambridgeState
MNZip Code
55008FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MNOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	01	2018

Transaction ID : SA11AI.211754

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

48.00

X	11a		11b		11c		12		
	13		14		15		16		17

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

FEC Schedule A (Form 3X) Rev. 06/2016

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1034 OF 1411

(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. RIVERA, THOMAS, A., ,

Mailing Address 388 Oaklyn Road

City
Lebanon

State
PA

Zip Code
17042

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 ▼

579.64

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207137

Amount of Each Receipt this Period

54.84

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RIVLIN, JUDITH, E., ,

Mailing Address 5203 Westport Road

City
Chevy Chase

State
MD

Zip Code
20815

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2653.80

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206434

Amount of Each Receipt this Period

128.54

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RIVLIN, JUDITH, E., ,

Mailing Address 5203 Westport Road

City
Chevy Chase

State
MD

Zip Code
20815

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2782.34

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206816

Amount of Each Receipt this Period

128.54

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

311.92

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1035 OF 1411

(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. ROACH, LYNETTE, F., ,

Mailing Address 617 N Ottawa Avenue

City
DixonState
ILZip Code
61021FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

REHAB WORKSHOP INSTRUCTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441.00

Date of Receipt

M M	D D	Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208318

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROBERSON, CLAUDIA, , ,Mailing Address 7340 S. Yates
2nd Fl.City
ChicagoState
ILZip Code
60649FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31

Occupation (for Individual)

ASSOCIATE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1067.40

Date of Receipt

M M	D D	Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208319

Amount of Each Receipt this Period

106.74

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROBERTS, MICHAEL, D., ,

Mailing Address 2716 Castlegate Avenue

City
PittsburghState
PAZip Code
15226FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME PA CN 13/NSP/LOCAL 297

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M	D D	Y Y Y Y
11	08	2018

Transaction ID : SA11AI.207138

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

168.74

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 1036 OF 1411

(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. ROBERTS, STEPHEN, M., ,

Mailing Address 5661 Windsor Woods Drive

City
Columbus

State
OH

Zip Code
43230

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.24

Date of Receipt

11 / 06 / 2018

Transaction ID : SA11AI.210936

Amount of Each Receipt this Period

20.84

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROBERTS, TIMOTHY, W., ,

Mailing Address 5033 Ridgewood Road E.

City
Springfield

State
OH

Zip Code
45503

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11

Occupation (for Individual)
PROJECT DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.00

Date of Receipt

11 / 06 / 2018

Transaction ID : SA11AI.210478

Amount of Each Receipt this Period

120.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROBINSON, JAMES, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

10 / 25 / 2018

Transaction ID : SA11AI.207501

Amount of Each Receipt this Period

18.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

158.84

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1037 OF 1411

(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. ROBINSON, JAMES, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207703

Amount of Each Receipt this Period

18.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROBINSON, JAMES, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207938

Amount of Each Receipt this Period

18.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROBINSON, JOHN, R., ,

Mailing Address 870 N Trask Road

City
Aurora

State
IL

Zip Code
60505

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
PROGRAMMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

791.73

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208320

Amount of Each Receipt this Period

83.34

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

119.34

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 1038 OF 1411

(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. ROBINSON, KATHRYN, , ,			Date of Receipt M M / D D / Y Y Y Y Y 11 / 05 / 2018 Transaction ID : SA11AI.208321	
Mailing Address 29 N. Wacker Drive Suite 800			Amount of Each Receipt this Period 58.20	
City Chicago	State IL	Zip Code 60606	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) AFSCME IL CN 31		Occupation (for Individual) STAFF REPRESENTATIVE		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Aggregate Year-to-Date ▼ 581.99		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. ROBINSON, TONY, A., ,			Date of Receipt M M / D D / Y Y Y Y Y 10 / 26 / 2018 Transaction ID : SA11AI.209187	
Mailing Address 219 Thorn Locust Lane			Amount of Each Receipt this Period 14.50	
City London	State OH	Zip Code 43140	☐ Memo Item	
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 ▼ 319.00		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. ROBINSON, TONY, A., ,			Date of Receipt M M / D D / Y Y Y Y Y 11 / 09 / 2018 Transaction ID : SA11AI.209818	
Mailing Address 219 Thorn Locust Lane			Amount of Each Receipt this Period 14.50	
City London	State OH	Zip Code 43140	☐ Memo Item	
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 ▼ 333.50		
SUBTOTAL of Receipts This Page (optional).....▶			87.20	
TOTAL This Period (last page this line number only).....▶				

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1039 OF 1411

(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. ROBINSON, TONY, A., ,

Mailing Address 219 Thorn Locust Lane

City
LondonState
OHZip Code
43140FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	3			2	0	1	8		

Transaction ID : SA11AI.210479

Amount of Each Receipt this Period

14.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROBINSON-JOHNSON, RHONDA, , ,

Mailing Address 3006 Ashton row w

City
Grove CityState
OHZip Code
43123FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	8		

Transaction ID : SA11AI.209188

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROBINSON-JOHNSON, RHONDA, , ,

Mailing Address 3006 Ashton row w

City
Grove CityState
OHZip Code
43123FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	9			2	0	1	8		

Transaction ID : SA11AI.209819

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

34.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1040 OF 1411

(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. ROBINSON-JOHNSON, RHONDA, , ,

Mailing Address 3006 Ashton row w

City
Grove CityState
OHZip Code
43123FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210480

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RODGER, SUSAN, , ,

Mailing Address 8033 Excelsior Drive

City
MadisonState
WIZip Code
53717FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WI CN 32Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2018

Transaction ID : SA11AI.211424

Amount of Each Receipt this Period

9.23

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RODGER, SUSAN, , ,

Mailing Address 8033 Excelsior Drive

City
MadisonState
WIZip Code
53717FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WI CN 32Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

212.29

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2018

Transaction ID : SA11AI.211425

Amount of Each Receipt this Period

9.23

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

28.46

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1041 OF 1411

(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. RODGER, SUSAN, , ,

Mailing Address 8033 Excelsior Drive

City
MadisonState
WIZip Code
53717FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WI CN 32

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

Transaction ID : SA11AI.211447

Amount of Each Receipt this Period

9.23

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RODRIGUEZ, ADELAIDA, , ,

Mailing Address 3514 Fairbanks Ave

City
YakimaState
WAZip Code
98902FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.207704

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RODRIGUEZ, ADELAIDA, , ,

Mailing Address 3514 Fairbanks Ave

City
YakimaState
WAZip Code
98902FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2018

Transaction ID : SA11AI.207939

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

29.23

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1042 OF 1411

(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. RODRIGUEZ, CATHERINE, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 6001 Vistamar Road <table border="1"> <tr> <td>City Toledo</td> <td>State OH</td> <td>Zip Code 43611</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1"> <tr> <td>Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH</td> <td>Occupation (for Individual) CORRECTION OFFICER</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>207.00</td> </tr> </table>			City Toledo	State OH	Zip Code 43611	Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) CORRECTION OFFICER	207.00	Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td>09</td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.209820 Amount of Each Receipt this Period <table border="1"> <tr> <td>9.00</td> </tr> </table> ☐ Memo Item	M M M	D D D	Y Y Y Y Y Y	11	09	2018	9.00
City Toledo	State OH	Zip Code 43611														
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) CORRECTION OFFICER															
207.00																
M M M	D D D	Y Y Y Y Y Y														
11	09	2018														
9.00																
B. RODRIGUEZ, CATHERINE, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 6001 Vistamar Road <table border="1"> <tr> <td>City Toledo</td> <td>State OH</td> <td>Zip Code 43611</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1"> <tr> <td>Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH</td> <td>Occupation (for Individual) CORRECTION OFFICER</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>216.00</td> </tr> </table>			City Toledo	State OH	Zip Code 43611	Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) CORRECTION OFFICER	216.00	Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td>23</td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.210481 Amount of Each Receipt this Period <table border="1"> <tr> <td>9.00</td> </tr> </table> ☐ Memo Item	M M M	D D D	Y Y Y Y Y Y	11	23	2018	9.00
City Toledo	State OH	Zip Code 43611														
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) CORRECTION OFFICER															
216.00																
M M M	D D D	Y Y Y Y Y Y														
11	23	2018														
9.00																
C. ROEHRIG, LAWRENCE, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 13084 Lia Court <table border="1"> <tr> <td>City Lindon</td> <td>State MI</td> <td>Zip Code 48451</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1"> <tr> <td>Name of Employer (for Individual) AFSCME MI CN 25</td> <td>Occupation (for Individual) EXECUTIVE DIRECTOR</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>3354.35</td> </tr> </table>			City Lindon	State MI	Zip Code 48451	Name of Employer (for Individual) AFSCME MI CN 25	Occupation (for Individual) EXECUTIVE DIRECTOR	3354.35	Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td>31</td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.206162 Amount of Each Receipt this Period <table border="1"> <tr> <td>70.00</td> </tr> </table> ☐ Memo Item	M M M	D D D	Y Y Y Y Y Y	10	31	2018	70.00
City Lindon	State MI	Zip Code 48451														
Name of Employer (for Individual) AFSCME MI CN 25	Occupation (for Individual) EXECUTIVE DIRECTOR															
3354.35																
M M M	D D D	Y Y Y Y Y Y														
10	31	2018														
70.00																
SUBTOTAL of Receipts This Page (optional)..... ▶			<table border="1"> <tr> <td>88.00</td> </tr> </table>	88.00												
88.00																
TOTAL This Period (last page this line number only)..... ▶			<table border="1"> <tr> <td></td> </tr> </table>													

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1043 OF 1411

(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. ROEHRIG, LAWRENCE, , ,

Mailing Address 13084 Lia Court

City
LondonState
MIZip Code
48451FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MI CN 25Occupation (for Individual)
EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3478.57

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2018

Transaction ID : SA11AI.211346

Amount of Each Receipt this Period

124.22

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROEHRIG, LAWRENCE, , ,

Mailing Address 13084 Lia Court

City
LondonState
MIZip Code
48451FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MI CN 25Occupation (for Individual)
EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3602.79

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	20	/	2018

Transaction ID : SA11AI.211397

Amount of Each Receipt this Period

124.22

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROESCH, MICHAEL, J., ,

Mailing Address 5505 Deerfield Drive

City
FairviewState
PAZip Code
16415FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2018

Transaction ID : SA11AI.207139

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

268.44

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 1044 OF 1411

(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. ROGATO, MICHAEL, J., ,

Mailing Address 107 Edward Road

 City
 St. Marys

 State
 PA

 Zip Code
 15857

 FEC ID number of contributing
 federal political committee.

C

 Name of Employer (for Individual)
 AFSCME PA CN 13/STATE OF PA

 Occupation (for Individual)
 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
10	31	2018

Transaction ID : SA11AI.207140

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROHRBAUGH, JAMES, R., ,

Mailing Address 2314 Ravenna Road

 City
 Ravenna

 State
 OH

 Zip Code
 44266

 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 ▼

220.00

Date of Receipt

M M	D D	Y Y Y Y
10	26	2018

Transaction ID : SA11AI.209190

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROHRBAUGH, JAMES, R., ,

Mailing Address 2314 Ravenna Road

 City
 Ravenna

 State
 OH

 Zip Code
 44266

 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 ▼

230.00

Date of Receipt

M M	D D	Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209821

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

40.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1045 OF 1411

(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. ROHRBAUGH, JAMES, R., ,

Mailing Address 2314 Ravenna Road

City
RavennaState
OHZip Code
44266FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			23			2018			

Transaction ID : SA11AI.210482

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROMERO, JUAN, C., ,Mailing Address 1959 Columbia Pike
#34City
ArlingtonState
VAZip Code
22204FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
LABOR ECONOMIST II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

816.67

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2018			

Transaction ID : SA11AI.206436

Amount of Each Receipt this Period

41.68

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROMERO, JUAN, C., ,Mailing Address 1959 Columbia Pike
#34City
ArlingtonState
VAZip Code
22204FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
LABOR ECONOMIST II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

858.35

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2018			

Transaction ID : SA11AI.206818

Amount of Each Receipt this Period

41.68

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

93.36

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1046 OF 1411

(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. ROMERO-ELY, MILAGROS, , ,

Mailing Address 4413 Jams Avenue N

City
MinneapolisState
MNZip Code
55412FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MNOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	01	2018

Transaction ID : SA11AI.211755

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RONE, JAMES, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	25	2018

Transaction ID : SA11AI.207503

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RONE, JAMES, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.207705

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

60.00

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 1047 OF 1411

(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. RONE, JAMES, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207940

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROS, PABLO, F., ,

Mailing Address 1704 13th Road S.

City
Arlington

State
VA

Zip Code
22204

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
SENIOR COMMUNICATIONS SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

974.52

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206437

Amount of Each Receipt this Period

49.02

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROS, PABLO, F., ,

Mailing Address 1704 13th Road S.

City
Arlington

State
VA

Zip Code
22204

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
SENIOR COMMUNICATIONS SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1023.54

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206819

Amount of Each Receipt this Period

49.02

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

118.04

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1048 OF 1411

(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. ROSASCO, ANGELINA, , ,

Mailing Address 2501 Brier Street SE

City
WarrenState
OHZip Code
44484FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
WORKERS COMPENSATION CLAIMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2018			

Transaction ID : SA11AI.209191

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROSASCO, ANGELINA, , ,

Mailing Address 2501 Brier Street SE

City
WarrenState
OHZip Code
44484FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
WORKERS COMPENSATION CLAIMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			09			2018			

Transaction ID : SA11AI.209822

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROSASCO, ANGELINA, , ,

Mailing Address 2501 Brier Street SE

City
WarrenState
OHZip Code
44484FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
WORKERS COMPENSATION CLAIMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			23			2018			

Transaction ID : SA11AI.210483

Amount of Each Receipt this Period

14.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

42.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1049 OF 1411

(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. ROSE, JOHN, A, ,

Mailing Address 589 Woodville Road

City
MansfieldState
OHZip Code
44907FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.209192

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROSE, JOHN, A, ,

Mailing Address 589 Woodville Road

City
MansfieldState
OHZip Code
44907FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209823

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROSE, JOHN, A, ,

Mailing Address 589 Woodville Road

City
MansfieldState
OHZip Code
44907FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210484

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

30.00

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 1050 OF 1411

(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. ROSENBERGER, ANDREW, , ,

Mailing Address 719 6th Street

City
Monessen

State
PA

Zip Code
15062

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.207141

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROSKOWIC, CYNTHIA, M., ,

Mailing Address 1802 Manley Street

City
Madison

State
WI

Zip Code
53704

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WI CN 32

Occupation (for Individual)
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 Y
10 / 22 / 2018

Transaction ID : SA11AI.211448

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROSS, CHRISTOPHER, , ,

Mailing Address 3507 Timberlake Drive

City
Joliet

State
IL

Zip Code
60435

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
CORRECTIONAL OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208322

Amount of Each Receipt this Period

42.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

107.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1051 OF 1411

(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. ROSS, DAYSI, , ,

Mailing Address 3507 Timberlake Drive

City
Joliet

State
IL

Zip Code
60435

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
CORRECTIONAL OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208323

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROSS, LAURA, G., ,

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 (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
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
11 / 01 / 2018

Transaction ID : SA11AI.211756

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROSS, MATTHEW, L., ,

Mailing Address P.O. Box 236

City

Vanlue

State
OH

Zip Code
45890

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 ▼

374.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209193

Amount of Each Receipt this Period

17.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

89.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1052 OF 1411

(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. ROSS, MATTHEW, L., ,

Mailing Address P.O. Box 236

City
Vanlue

State
OH

Zip Code
45890

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 ▼

391.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209824

Amount of Each Receipt this Period

17.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROSS, MATTHEW, L., ,

Mailing Address P.O. Box 236

City
Vanlue

State
OH

Zip Code
45890

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 ▼

408.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210485

Amount of Each Receipt this Period

17.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROSS-THOMPSON, FELICA, L., ,

Mailing Address 430 Warfield Drive
#2107

City
Landover

State
MD

Zip Code
20785

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ADMINISTRATIVE ASSISTANT II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

864.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206438

Amount of Each Receipt this Period

41.38

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

75.38

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1053 OF 1411

(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. ROSS-THOMPSON, FELICA, L., ,

Mailing Address 430 Warfield Drive
#2107

City
Landover

State
MD

Zip Code
20785

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ADMINISTRATIVE ASSISTANT II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

905.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206820

Amount of Each Receipt this Period

41.38

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROTH, KEVIN, R., ,

Mailing Address 3355 N. Whipple Street
#25

City
Chicago

State
IL

Zip Code
60618

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
HUMAN SERVICES CASEWORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208324

Amount of Each Receipt this Period

41.66

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROTH, STEVEN, , ,

Mailing Address 6800 N. High Street

City
Worthington

State
OH

Zip Code
43085

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1026.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210937

Amount of Each Receipt this Period

93.72

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

176.76

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1054 OF 1411

(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. ROTH-GARFIELD, CYNTHIA, L., ,

Mailing Address 3327 N Oakley Avenue

City
Chiacgo

State
IL

Zip Code
60618

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
OFFICE MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.40

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208325

Amount of Each Receipt this Period

20.84

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROWE, CLINTON, D., ,

Mailing Address 239 Concord Avenue

City
Mansfield

State
OH

Zip Code
44906

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 ▼

319.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209194

Amount of Each Receipt this Period

14.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROWE, CLINTON, D., ,

Mailing Address 239 Concord Avenue

City
Mansfield

State
OH

Zip Code
44906

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 ▼

333.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209825

Amount of Each Receipt this Period

14.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

49.84

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1055 OF 1411

(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. ROWE, CLINTON, D., ,

Mailing Address 239 Concord Avenue

City
MansfieldState
OHZip Code
44906FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M	D D	Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210486

Amount of Each Receipt this Period

14.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROWE, LESLIE, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
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
11	09	2018

Transaction ID : SA11AI.207706

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROWE, LESLIE, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
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
11	26	2018

Transaction ID : SA11AI.207941

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

34.50

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 1056 OF 1411

(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. ROWE, SUSAN, L., ,

Mailing Address 207 9th Avenue

City
Slater

State
IA

Zip Code
50244

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 18 / 2018

Transaction ID : SA11AI.211855

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROWE, SUSAN, L., ,

Mailing Address 207 9th Avenue

City
Slater

State
IA

Zip Code
50244

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.211923

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RUDDY, COLLEEN, , ,

Mailing Address 4301 Executive Park Drive

City
Harrisburg

State
PA

Zip Code
17111

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

335.94

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207142

Amount of Each Receipt this Period

30.54

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

130.54

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 1057 OF 1411

(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. RUDDY, DIANE, M., ,

Mailing Address 413 Dean Street

 City
 Scranton

 State
 PA

 Zip Code
 18509

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME PA CN 13/STATE OF PA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.207143

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RUDOLPH-DIXON, CORLETTE, R., ,

Mailing Address 5433 Hollywood Avenue

City

Maple Heights

State

OH

Zip Code

44137

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 WORKERS COMP CLAIMS ADJUSTE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.210487

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RUGOLA, JOSEPH, P., ,

Mailing Address 6805 Oak Creek Drive

City

Columbus

State

OH

Zip Code

43229

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 4

 Occupation (for Individual)
 EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.206163

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1058 OF 1411

(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. RUHL, PENNI, L., ,

Mailing Address 10 Knox Road 465N

City
AbingdonState
ILZip Code
61410FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
CORRECTIONAL OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

798.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208326

Amount of Each Receipt this Period

84.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RUIZ, RICHARDO, M., ,

Mailing Address 527 White Oak Road

City
BolingbrookState
ILZip Code
60440FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
CORRECTIONS OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208327

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RUMMEL, BLAINE, J., ,Mailing Address 5 E. Glebe Road
Apt. DCity
AlexandriaState
VAZip Code
22305FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
ASSOCIATE DIRECTOR, COMMUNIC/

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1611.73

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206439

Amount of Each Receipt this Period

76.12

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

181.12

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1059 OF 1411

(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. RUMMEL, BLAINE, J., ,

Mailing Address 5 E. Glebe Road
Apt. D

City
Alexandria

State
VA

Zip Code
22305

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ASSOCIATE DIRECTOR, COMMUNIC.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1687.85

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206821

Amount of Each Receipt this Period

76.12

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RUMMEL, KELLY, D., ,

Mailing Address 161 Redmill Road

City

Ebensburg

State
PA

Zip Code
15931

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)
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
10 / 31 / 2018

Transaction ID : SA11AI.207144

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RUSH, REBECCA, , ,

Mailing Address 1212 Jefferson Street SE

City

Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 25 / 2018

Transaction ID : SA11AI.207505

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

116.12

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 1060 OF 1411

(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. RUSH, REBECCA, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2018

Transaction ID : SA11AI.207707

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RUSH, REBECCA, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2018

Transaction ID : SA11AI.207942

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RUSSELL, AMY, , ,

Mailing Address 4320 NW Second Avenue

City
Des MoinesState
IAZip Code
50313FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.72

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2018

Transaction ID : SA11AI.211875

Amount of Each Receipt this Period

42.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

82.00

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 1061 OF 1411

(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. RUSSELL, AMY, , ,

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 (for Individual)
AFSCME IA CN 61

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.72

Date of Receipt

11 / 06 / 2018

Transaction ID : SA11AI.211924

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RUSSELL, BRENDA, L., ,

Mailing Address 979 Parkside Place
Apt. B11

City
Cincinnati

State
OH

Zip Code
45202

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
UTILITIES RELOCATION SPEIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

10 / 26 / 2018

Transaction ID : SA11AI.209196

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RUSSELL, BRENDA, L., ,

Mailing Address 979 Parkside Place
Apt. B11

City
Cincinnati

State
OH

Zip Code
45202

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
UTILITIES RELOCATION SPEIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209827

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

62.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1062 OF 1411

(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. RUSSELL, BRENDA, L., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 979 Parkside Place Apt. B11 City Cincinnati State OH Zip Code 45202 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH Occupation (for Individual) UTILITIES RELOCATION SPEIALIST Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00			Date of Receipt 11 / 23 / 2018 Transaction ID : SA11AI.210488 Amount of Each Receipt this Period 10.00 ☐ Memo Item
B. RUST, TONI, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 2981 Ala Napuaa Place Apt. 203 City Honolulu State HI Zip Code 96818 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME HI LOC 152 Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00			Date of Receipt 11 / 01 / 2018 Transaction ID : SA11AI.211016 Amount of Each Receipt this Period 20.00 ☐ Memo Item
C. RUTH, ADAMS, L., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 949 Fairview Avenue City Galion State OH Zip Code 44833 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 ▼ 480.00			Date of Receipt 11 / 06 / 2018 Transaction ID : SA11AI.210489 Amount of Each Receipt this Period 40.00 ☐ Memo Item
SUBTOTAL of Receipts This Page (optional)..... ▶			70.00
TOTAL This Period (last page this line number only)..... ▶			

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1063 OF 1411

(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. RUTH, ROGER, D ., ,

Mailing Address 1457 N 3rd Street

City
SpringfieldState
ILZip Code
62702FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
CHILD SUPPORT SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.40

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208328

Amount of Each Receipt this Period

31.26

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RUTTER, SEAN, D., ,

Mailing Address 803 Regent Court

City
WellingtonState
OHZip Code
44090FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.209197

Amount of Each Receipt this Period

17.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RUTTER, SEAN, D., ,

Mailing Address 803 Regent Court

City
WellingtonState
OHZip Code
44090FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

391.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209828

Amount of Each Receipt this Period

17.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

65.26

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 1064 OF 1411

(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. RUTTER, SEAN, D., ,

Mailing Address 803 Regent Court

City
Wellington

State
OH

Zip Code
44090

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 ▼

408.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210490

Amount of Each Receipt this Period

17.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RYDER, LISABETH, L., ,

Mailing Address 2510 Sunset Road
#5-473

City
Las Vegas

State
NV

Zip Code
89120

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
DATABASE ANALYST I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206440

Amount of Each Receipt this Period

45.28

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RYTER, KAREN, S., ,

Mailing Address 4465 Landings Road

City
Groveport

State
OH

Zip Code
43125

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209198

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

72.28

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 1065 OF 1411

(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. RYTHER, KAREN, S., ,

Mailing Address 4465 Landings Road

 City
 Groveport

 State
 OH

 Zip Code
 43125

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.209829

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RYTHER, KAREN, S., ,

Mailing Address 4465 Landings Road

 City
 Groveport

 State
 OH

 Zip Code
 43125

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.210491

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RZEPPA, STEVEN, , ,

Mailing Address 1034 N. Washington Avenue

 City
 Lansing

 State
 MI

 Zip Code
 48906

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME MI CN 25

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.211347

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1066 OF 1411

(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. RZEPPA, STEVEN, , ,			Date of Receipt 11 / 20 / 2018 Transaction ID : SA11AI.211398		
Mailing Address 1034 N. Washington Avenue			Amount of Each Receipt this Period 10.50		
City Lansing	State MI	Zip Code 48906	☐ Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 231.00		
Name of Employer (for Individual) AFSCME MI CN 25			Occupation (for Individual) STAFF REPRESENTATIVE		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼			Aggregate Year-to-Date ▼ 231.00		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SACKS, ELIGA, , ,			Date of Receipt 10 / 25 / 2018 Transaction ID : SA11AI.207506		
Mailing Address 1212 Jefferson Street SE			Amount of Each Receipt this Period 11.00		
City Olympia	State WA	Zip Code 98501	☐ Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 220.00		
Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA			Occupation (for Individual) STAFF REPRESENTATIVE		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼			Aggregate Year-to-Date ▼ 220.00		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SACKS, ELIGA, , ,			Date of Receipt 11 / 09 / 2018 Transaction ID : SA11AI.207708		
Mailing Address 1212 Jefferson Street SE			Amount of Each Receipt this Period 11.00		
City Olympia	State WA	Zip Code 98501	☐ Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 231.00		
Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA			Occupation (for Individual) STAFF REPRESENTATIVE		
Receipt For: ☐ Primary ☐ General ☐ Other (specify)			Aggregate Year-to-Date ▼ 231.00		
SUBTOTAL of Receipts This Page (optional).....▶			32.50		
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 1067 OF 1411

(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. SACKS, ELIGA, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207943

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SALAZAR, AMY, M., ,

Mailing Address 1104 Stilwell Avenue

City
Fremont

State
OH

Zip Code
43420

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ODJFS CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209199

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SALAZAR, AMY, M., ,

Mailing Address 1104 Stilwell Avenue

City
Fremont

State
OH

Zip Code
43420

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ODJFS CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

322.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209830

Amount of Each Receipt this Period

14.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

39.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1068 OF 1411

(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. SALAZAR, AMY, M., ,

Mailing Address 1104 Stilwell Avenue

City
FremontState
OHZip Code
43420FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ODJFS CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210492

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SALDANA, SUSANA, , ,

Mailing Address 1319 Oleander Lane

City

Paso Robles

State
CAZip Code
93446FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 3930Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	07	2018

Transaction ID : SA11AI.211162

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SALOW, CURTIS, C., ,

Mailing Address 317 4th Avenue SE

City

Independence

State
IAZip Code
50644FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/STATE OF IAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

808.50

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	18	2018

Transaction ID : SA11AI.211856

Amount of Each Receipt this Period

38.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

72.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1069 OF 1411

(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. SALOW, CURTIS, C., ,

Mailing Address 317 4th Avenue SE

City

Independence

State

IA

Zip Code

50644

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

847.00

Date of Receipt

M M	D D	Y Y Y Y
10	26	2018

Transaction ID : SA11AI.211925

Amount of Each Receipt this Period

38.50

☐

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SALOW, KYM, S., ,

Mailing Address 317 4th Avenue SE

City

Independence

State

IA

Zip Code

50644

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

808.50

Date of Receipt

M M	D D	Y Y Y Y
10	18	2018

Transaction ID : SA11AI.211857

Amount of Each Receipt this Period

38.50

☐

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SALOW, KYM, S., ,

Mailing Address 317 4th Avenue SE

City

Independence

State

IA

Zip Code

50644

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify)
☐ General

Aggregate Year-to-Date ▼

847.00

Date of Receipt

M M	D D	Y Y Y Y
10	26	2018

Transaction ID : SA11AI.211926

Amount of Each Receipt this Period

38.50

☐

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

115.50

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1070 OF 1411

(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. SAMBRANO, CASSANDRA, , ,

Mailing Address 1246 S Street

City
NewmanState
CAZip Code
95360FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 3930Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			07			2018			

Transaction ID : SA11AI.211163

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SAMPSON, PATRIA, L., ,Mailing Address 2700 Maple Street
Unit C121City
BremertonState
WAZip Code
98310FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2018			

Transaction ID : SA11AI.207507

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SAMPSON, PATRIA, L., ,Mailing Address 2700 Maple Street
Unit C121City
BremertonState
WAZip Code
98310FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
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
11			09			2018			

Transaction ID : SA11AI.207709

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

61.00

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 1071 OF 1411

(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. SAMPSON, PATRIA, L., ,

 Mailing Address 2700 Maple Street
 Unit C121

 City
 Bremerton

 State
 WA

 Zip Code
 98310

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.207944

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SANDBERG, ERICA, A., ,

Mailing Address 42251 Deerfield Road

City

Sturgeon Lake

State

MN

Zip Code

55783

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME MN CN 5/STATE OF MN

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.211757

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SANDERS, LISA, D., ,

 Mailing Address 9715 Loretta Avenue
 Apt. 9

City

Cleveland

State

OH

Zip Code

44102

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 OFFICE ASSISTANT I

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.209831

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1072 OF 1411

(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. SANDERS, LISA, D., ,			Date of Receipt 11 / 23 / 2018 Transaction ID : SA11AI.210493		
Mailing Address 9715 Loretta Avenue Apt. 9			Amount of Each Receipt this Period 9.00		
City Cleveland	State OH	Zip Code 44102	☐ Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 216.00		
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH		Occupation (for Individual) OFFICE ASSISTANT I	Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SANDERSON, JUNE, E., ,			Date of Receipt 10 / 25 / 2018 Transaction ID : SA11AI.207508		
Mailing Address 4304 Independence Road			Amount of Each Receipt this Period 20.00		
City Sunnyside	State WA	Zip Code 98944	☐ Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 400.00		
Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA		Occupation (for Individual) STAFF REPRESENTATIVE	Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SANDERSON, JUNE, E., ,			Date of Receipt 11 / 09 / 2018 Transaction ID : SA11AI.207710		
Mailing Address 4304 Independence Road			Amount of Each Receipt this Period 20.00		
City Sunnyside	State WA	Zip Code 98944	☐ Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 420.00		
Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA		Occupation (for Individual) STAFF REPRESENTATIVE	Receipt For: ☐ Primary ☐ General ☐ Other (specify)		
SUBTOTAL of Receipts This Page (optional).....▶			49.00		
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 1073 OF 1411

(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. SANDERSON, JUNE, E., ,

Mailing Address 4304 Independence Road

City
Sunnyside

State
WA

Zip Code
98944

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207945

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SANTIAGO, PRISCILA, , ,

Mailing Address 1517 Tracy Circle

City
Columbus

State
OH

Zip Code
43223

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
WORKERS COMP CLAIMS REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209832

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SANTIAGO, PRISCILA, , ,

Mailing Address 1517 Tracy Circle

City
Columbus

State
OH

Zip Code
43223

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
WORKERS COMP CLAIMS REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210494

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

38.00

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 1074 OF 1411

(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. SANTUCCI, VINCENT, , ,

Mailing Address 1952 Antietam Street

City
Pittsburgh

State
PA

Zip Code
15206

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/NSP/LOCAL 324

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207145

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SAUNDERS, LEE, A., ,

Mailing Address 7510 Alaska Avenue NW

City
Washington

State
DC

Zip Code
20012

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
INTERNATIONAL PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2707.40

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206445

Amount of Each Receipt this Period

135.37

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SAUNDERS, LEE, A., ,

Mailing Address 7510 Alaska Avenue NW

City
Washington

State
DC

Zip Code
20012

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
INTERNATIONAL PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2842.77

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206826

Amount of Each Receipt this Period

135.37

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

290.74

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1075 OF 1411

(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. SAUNDERS, MICHAEL, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M	D D	Y Y Y Y
10	25	2018

Transaction ID : SA11AI.207509

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SAUNDERS, MICHAEL, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
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
11	09	2018

Transaction ID : SA11AI.207711

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SAUNDERS, MICHAEL, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M	D D	Y Y Y Y
11	26	2018

Transaction ID : SA11AI.207946

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

60.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1076 OF 1411

(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. SAVEA, NIMESA, T., ,

Mailing Address 2133 Citron Street

Apt. #36

City

Honolulu

State

HI

Zip Code

96826

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME HI LOC 646

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

229.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.211290

Amount of Each Receipt this Period

20.84

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SAVELY, JAMES, R., ,

Mailing Address 22060 Fox Road

City

New Plymouth

State

OH

Zip Code

45654

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210495

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SAWYERS, ANNETTE, , ,

Mailing Address 2020 Chestnut Street

City

Harrisburg

State

PA

Zip Code

17104

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2018

Transaction ID : SA11AI.207146

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

49.34

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 1077 OF 1411

(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. SCHAFFER, CIARA, C., ,

Mailing Address 40 Glover Avenue

City
Norwalk

State
OH

Zip Code
44857

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HOSPITAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209834

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHAFFER, CIARA, C., ,

Mailing Address 40 Glover Avenue

City
Norwalk

State
OH

Zip Code
44857

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HOSPITAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210496

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHEER-TILL, AMY, K., ,

Mailing Address 3911 Queensbury Road

City
Hyattsville

State
MD

Zip Code
20782

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
DIGITAL COMMUNICATIONS SPECIAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

686.05

Date of Receipt

10 / 31 / 2018

Transaction ID : SA11AI.206446

Amount of Each Receipt this Period

33.57

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

51.57

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1078 OF 1411

(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. SCHEER-TILL, AMY, K., ,

Mailing Address 3911 Queensbury Road

City
Hyattsville

State
MD

Zip Code
20782

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

DIGITAL COMMUNICATIONS SPECIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

719.62

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206827

Amount of Each Receipt this Period

33.57

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHEFFER, MICHAEL, , ,

Mailing Address 390 Worthington Road

City
Westerville

State
OH

Zip Code
43082

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210497

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHEIB, TANYA, R., ,

Mailing Address 1617 S 7th Street

City
Springfield

State
IL

Zip Code
62703

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

DATA PROCESSING TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

204.60

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208329

Amount of Each Receipt this Period

30.66

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

84.23

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1079 OF 1411

(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. SCHEIDLER, JENNIFER, , ,

Mailing Address 4031 Executive Park Drive

City
HarrisburgState
PAZip Code
17111FEC 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 ▼

579.48

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	08	2018

Transaction ID : SA11AI.207147

Amount of Each Receipt this Period

52.68

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHLENER, JAMES, , ,

Mailing Address 4031 Executive Park Drive

City
HarrisburgState
PAZip Code
17111FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME PA CN 13/NSP/LOCAL 1435A

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	08	2018

Transaction ID : SA11AI.207148

Amount of Each Receipt this Period

22.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHMIDT, JOHN, M., ,

Mailing Address 919 Catlin Court

City
KentState
OHZip Code
44240FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

ENVIRONMENTAL SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

276.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.209204

Amount of Each Receipt this Period

16.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

90.68

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1080 OF 1411

(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. SCHMIDT, JOHN, M., ,

Mailing Address 919 Catlin Court

City
Kent

State
OH

Zip Code
44240

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ENVIRONMENTAL SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209835

Amount of Each Receipt this Period

16.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHMIDT, JOHN, M., ,

Mailing Address 919 Catlin Court

City
Kent

State
OH

Zip Code
44240

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ENVIRONMENTAL SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210498

Amount of Each Receipt this Period

16.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHMIDT, THOMAS, P., , JR.

Mailing Address 103 W Phoenix Drive

City
Phoenixville

State
PA

Zip Code
19460

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.207149

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

72.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1081 OF 1411

(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. SCHMITZ, JAMES, , ,Mailing Address 6437 Rock Forest Drive
#305City
BethesdaState
MDZip Code
20817FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L/STATE STREETOccupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

719.66

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			02			2018			

Transaction ID : SA11AI.206828

Amount of Each Receipt this Period

65.80

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHMITZ, MANDY, E., ,

Mailing Address 1017 Pimlico Drive

City

East Norriton

State

PA

Zip Code

19403

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PAOccupation (for Individual)
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
10			31			2018			

Transaction ID : SA11AI.207150

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHNEIDER, MARK, P., ,Mailing Address 94 Manor Road
#C

City

Akron

State

OH

Zip Code

44313

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/O'BLENESS MHOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			22			2018			

Transaction ID : SA11AI.210834

Amount of Each Receipt this Period

9.62

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

95.42

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 1082 OF 1411

(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. SCHNEIDER, MARK, P., ,

Mailing Address 94 Manor Road

#C

City

Akron

State

OH

Zip Code

44313

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH CN 8/O'BLENESS MH

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

221.26

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2018

Transaction ID : SA11AI.210835

Amount of Each Receipt this Period

9.62

☐

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHNEIDER, MARK, P., ,

Mailing Address 94 Manor Road

#C

City

Akron

State

OH

Zip Code

44313

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH CN 8/O'BLENESS MH

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

230.88

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		20		2018

Transaction ID : SA11AI.210939

Amount of Each Receipt this Period

9.62

☐

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHNEIDER, SAM, , ,

Mailing Address 1212 Jefferson Street SE

City

Olympia

State

WA

Zip Code

98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		09		2018

Transaction ID : SA11AI.207712

Amount of Each Receipt this Period

10.00

☐

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

29.24

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1083 OF 1411

(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. SCHNEIDER, SAM, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				26				2018					

Transaction ID : SA11AI.207947

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHOLL, KAREN, S., ,

Mailing Address 582 Braxton Place E

City
WestervilleState
OHZip Code
43081FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
SENIOR FINANCIAL ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				26				2018					

Transaction ID : SA11AI.209205

Amount of Each Receipt this Period

11.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHOLL, KAREN, S., ,

Mailing Address 582 Braxton Place E

City
WestervilleState
OHZip Code
43081FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
SENIOR FINANCIAL ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

264.50

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				09				2018					

Transaction ID : SA11AI.209836

Amount of Each Receipt this Period

11.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

33.00

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 1084 OF 1411

(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. SCHOLL, KAREN, S., ,

Mailing Address 582 Braxton Place E

City
Westerville

State
OH

Zip Code
43081

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
SENIOR FINANCIAL ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210499

Amount of Each Receipt this Period

11.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHOLL, TAMMY, , ,

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 ▼

579.48

Date of Receipt

11 / 08 / 2018

Transaction ID : SA11AI.207151

Amount of Each Receipt this Period

52.68

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHOONOVER, DANIEL, , ,

Mailing Address 1811 Fairview Street NE

City
Olympia

State
WA

Zip Code
98506

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/COMM COLLEGE

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.207713

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

74.18

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1085 OF 1411

(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. SCHOONOVER, DANIEL, , ,

Mailing Address 1811 Fairview Street NE

City
OlympiaState
WAZip Code
98506FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28/COMM COLLEGE

Occupation (for Individual)

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
11	26	2018

Transaction ID : SA11AI.207948

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHOTT, DAWN, M., ,

Mailing Address 405 E Holum Street

City

De Forest

State

WI

Zip Code

53532

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WI CN 32/STATE OF WI

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

476.64

Date of Receipt

M M	D D	Y Y Y Y
11	14	2018

Transaction ID : SA11AI.211449

Amount of Each Receipt this Period

39.72

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHRAM, CLETUS, J., ,

Mailing Address 607 N Green Street

City

Anna

State

IL

Zip Code

62906

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

MENTAL HEALTH TECH I

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

448.00

Date of Receipt

M M	D D	Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208330

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

99.72

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1086 OF 1411

(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. SCHROTH, KENNETH, C., , JR.

Mailing Address 166 Martin Road

City
IndianaState
PAZip Code
15701FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

546.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.207152

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHUBERT, ERIC, , ,

Mailing Address 132 College Avenue

City
ElmhurstState
PAZip Code
18416FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

901.83

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	08	2018

Transaction ID : SA11AI.207153

Amount of Each Receipt this Period

78.42

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHULTZ, JULIE, , ,Mailing Address 1325 Meadowview
Apt. #1City
MariounState
IAZip Code
52302FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/DOCSOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	18	2018

Transaction ID : SA11AI.211858

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

143.42

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1087 OF 1411

(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. SCHULTZ, JULIE, , ,

Mailing Address 1325 Meadowview

Apt. #1

City

Marioun

State

IA

Zip Code

52302

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IA CN 61/DOCS

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			26			2018					

Transaction ID : SA11AI.211927

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHWAB, LINDSAY, M., ,

Mailing Address 1532 Hague Avenue

City

St. Paul

State

MN

Zip Code

55104

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MN CN 5/HENNEPIN COUNTY

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

396.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			01			2018					

Transaction ID : SA11AI.211759

Amount of Each Receipt this Period

54.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHWANGER, MARY, , ,

Mailing Address 419 Valley Street

City

Marysville

State

PA

Zip Code

17053

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L/STATE STREET

Occupation (for Individual)

RETIREE

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

814.65

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			02			2018					

Transaction ID : SA11AI.206829

Amount of Each Receipt this Period

75.93

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

144.93

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1088 OF 1411

(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. SCHWARTZ, EDWARD, , ,

Mailing Address 7619 N Rogers Avenue

City
ChicagoState
ILZip Code
60626FEC 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 ▼

218.82

Date of Receipt

M M	D D	Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208331

Amount of Each Receipt this Period

31.26

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHWEIGERT, BENEDICT, J., ,

Mailing Address 4311 Garfield Avenue

City

Minneapolis

State

MN

Zip Code

55409

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)

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
11	01	2018

Transaction ID : SA11AI.211760

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHWENSOHN, DUNCAN, C., ,

Mailing Address 1708 Morning Side

City

Duluth

State

MN

Zip Code

55803

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)

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
11	01	2018

Transaction ID : SA11AI.211761

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

81.26

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1089 OF 1411

(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. SCHWER, TYLER, R., ,Mailing Address 2825 Gabriella Street
Unit 511City
Downers GroveState
ILZip Code
60515FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

JUVENILE JUSTICE SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			05			2018					

Transaction ID : SA11AI.208332

Amount of Each Receipt this Period

22.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCIPLIN, ANDREA, , ,

Mailing Address 2850 Sherwood Road

City
ColumbusState
OHZip Code
43209FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

ODJFS CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			26			2018					

Transaction ID : SA11AI.209206

Amount of Each Receipt this Period

9.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCIPLIN, ANDREA, , ,

Mailing Address 2850 Sherwood Road

City
ColumbusState
OHZip Code
43209FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

ODJFS CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

218.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			09			2018					

Transaction ID : SA11AI.209837

Amount of Each Receipt this Period

9.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

41.00

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 1090 OF 1411

(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. **SCIPLIN, ANDREA, , ,**

Mailing Address 2850 Sherwood Road

City
Columbus

State
OH

Zip Code
43209

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ODJFS CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210500

Amount of Each Receipt this Period

9.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **SCOTT, GAIL, M., ,**

Mailing Address 751 Bulen Avenue

City
Columbus

State
OH

Zip Code
43205

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

465.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210940

Amount of Each Receipt this Period

43.44

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **SCOTT, JESSIE, M., ,**

Mailing Address P.O. Box 13886

City
Columbus

State
OH

Zip Code
43213

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ACCOUNT CLERK I

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1067.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209207

Amount of Each Receipt this Period

48.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

101.44

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1091 OF 1411

(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. SCOTT, JESSIE, M., ,

Mailing Address P.O. Box 13886

City
ColumbusState
OHZip Code
43213FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ACCOUNT CLERK I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1115.50

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209838

Amount of Each Receipt this Period

48.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCOTT, JESSIE, M., ,

Mailing Address P.O. Box 13886

City
ColumbusState
OHZip Code
43213FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ACCOUNT CLERK I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1164.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210501

Amount of Each Receipt this Period

48.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SEALEY, CHRISTOPHER, N., ,

Mailing Address 9724 Logan Jay Drive

City
BealetonState
VAZip Code
22712FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

475.44

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206447

Amount of Each Receipt this Period

25.68

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

122.68

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1092 OF 1411

(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. SEALEY, CHRISTOPHER, N., ,

Mailing Address 9724 Logan Jay Drive

City
BealetonState
VAZip Code
22712FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

501.12

Date of Receipt

M M	D D	Y Y Y Y
11	15	2018

Transaction ID : SA11AI.206830

Amount of Each Receipt this Period

25.68

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SECREST, KIMBERLY, S., ,

Mailing Address 312 Main Street N

City
KimboltonState
OHZip Code
43749FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
THERAPUTIC PROGRAM WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M	D D	Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210502

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SEGALL, STEVEN, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M	D D	Y Y Y Y
10	25	2018

Transaction ID : SA11AI.207512

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

54.18

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 1093 OF 1411

(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. SEGALL, STEVEN, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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 Y
11 / 09 / 2018

Transaction ID : SA11AI.207714

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SEGALL, STEVEN, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207949

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SEIFFERT, KATHERINE, M., ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 26 / 2018

Transaction ID : SA11AI.207950

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1094 OF 1411

(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. SEIP, SUSAN, K., ,

Mailing Address 39 Boyer Road

City
Elma

State
WA

Zip Code
98541

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2018

Transaction ID : SA11AI.207214

Amount of Each Receipt this Period

9.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SELGA, JULIA, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 25 / 2018

Transaction ID : SA11AI.207514

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SELGA, JULIA, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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 Y
11 / 09 / 2018

Transaction ID : SA11AI.207716

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

49.50

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 1095 OF 1411

(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. SELGA, JULIA, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207951

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SELLS, YLEY, , ,

Mailing Address 5182 Via Marcos

City
Yorba Linda

State
CA

Zip Code
92887

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 1902

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 19 / 2018

Transaction ID : SA11AI.211068

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SELLS, YLEY, , ,

Mailing Address 5182 Via Marcos

City
Yorba Linda

State
CA

Zip Code
92887

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 1902

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

276.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211089

Amount of Each Receipt this Period

12.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

44.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1096 OF 1411

(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. SELLS, YLEY, , ,

Mailing Address 5182 Via Marcos

City
Yorba Linda

State
CA

Zip Code
92887

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 1902

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 20 / 2018

Transaction ID : SA11AI.211110

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SELVIDGE, JEREMIAH, J., ,

Mailing Address 1302 N Wasson Street

City
Streator

State
IL

Zip Code
61364

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
CORRECTIONS OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208333

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SENFT, ROBERT, S., ,

Mailing Address 828 Von Lunen Road

City
Johnstown

State
PA

Zip Code
15902

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.207154

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

73.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1097 OF 1411

(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. SENN, MICHAEL, , ,

Mailing Address 8033 Excelsior Drive
Suite C

City
Madison

State
WI

Zip Code
53717

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WI CN 32/LOCAL

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.97

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2018

Transaction ID : SA11AI.211450

Amount of Each Receipt this Period

38.24

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SERFLING, JERRY, , ,

Mailing Address 2388 Hidden Valley Lane

City
Stillwater

State
MN

Zip Code
55082

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L/STATE STREET

Occupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 02 / 2018

Transaction ID : SA11AI.206831

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SERNA, PEDRO, , ,

Mailing Address 2721 4th Avenue
#538

City
Seattle

State
WA

Zip Code
98121

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 09 / 2018

Transaction ID : SA11AI.207717

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

73.24

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 1098 OF 1411

(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. SERNA, PEDRO, , ,

 Mailing Address 2721 4th Avenue
 #538

 City
 Seattle

 State
 WA

 Zip Code
 98121

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				26				2018					

Transaction ID : SA11AI.207952

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SERRANO, EDWARD, , , JR.

Mailing Address 1027 N Tippecanoe Street

 City
 Gary

 State
 IN

 Zip Code
 46403

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME INT'L

 Occupation (for Individual)
 AREA ORGANIZING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				31				2018					

Transaction ID : SA11AI.206448

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SERRANO, EDWARD, , , JR.

Mailing Address 1027 N Tippecanoe Street

 City
 Gary

 State
 IN

 Zip Code
 46403

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME INT'L

 Occupation (for Individual)
 AREA ORGANIZING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				15				2018					

Transaction ID : SA11AI.206832

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1099 OF 1411

(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. SERRANO, MARIA, I., ,

Mailing Address 921 E 3rd Street

#B

City

Calexico

State

CA

Zip Code

92231

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME CA LOC 3930

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			07			2018			

Transaction ID : SA11AI.211164

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SERRANO, NICHOLAS, A., ,

Mailing Address 3003 Van Ness Street NW

Apt. S217

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ASSOCIATE GENERAL COUNSEL

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1266.74

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2018			

Transaction ID : SA11AI.206449

Amount of Each Receipt this Period

62.15

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SERRANO, NICHOLAS, A., ,

Mailing Address 3003 Van Ness Street NW

Apt. S217

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ASSOCIATE GENERAL COUNSEL

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1328.89

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2018			

Transaction ID : SA11AI.206833

Amount of Each Receipt this Period

62.15

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

145.30

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 1100 OF 1411

(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. SERRELL, TANYA, C., ,

Mailing Address 2327 Dunkirk Drive

City
Columbus

State
OH

Zip Code
43219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
JUVENILE CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209209

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SERRELL, TANYA, C., ,

Mailing Address 2327 Dunkirk Drive

City
Columbus

State
OH

Zip Code
43219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
JUVENILE CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209840

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SERRELL, TANYA, C., ,

Mailing Address 2327 Dunkirk Drive

City
Columbus

State
OH

Zip Code
43219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
JUVENILE CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210503

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

39.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1101 OF 1411

(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. SETTLES, BRUCE, W., ,

Mailing Address P.O. Box 1166

City
RivertonState
ILZip Code
62561FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
CORRECTIONS SERGEANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208334

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SETTLES, MARCELLA, R., ,

Mailing Address P.O. Box 21

City
BuckinghamState
ILZip Code
60917FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
MENTAL HEALTH TECH I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.80

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208335

Amount of Each Receipt this Period

41.68

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SEVILLE, MICHAEL, , ,Mailing Address 80 Swan Way
Suite 110City
OaklandState
CAZip Code
94621FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA CN 57Occupation (for Individual)
EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	24	2018

Transaction ID : SA11AI.211246

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

162.68

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1102 OF 1411

(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. SEWAKE, TERRIANNE, K., ,

Mailing Address 1374 Mailani Street

City
HiloState
HIZip Code
96720FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 152Occupation (for Individual)
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
11			01			2018			

Transaction ID : SA11AI.211017

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SFORZA, MICHELLE, A., ,

Mailing Address 415 U Street NW

City
WashingtonState
DCZip Code
20001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
ASSISTANT DIRECTOR, CORPORAT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1254.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2018			

Transaction ID : SA11AI.206451

Amount of Each Receipt this Period

62.71

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SFORZA, MICHELLE, A., ,

Mailing Address 415 U Street NW

City
WashingtonState
DCZip Code
20001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
ASSISTANT DIRECTOR, CORPORATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1316.91

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2018			

Transaction ID : SA11AI.206835

Amount of Each Receipt this Period

62.71

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

145.42

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 1103 OF 1411

(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. SGRO, DOMINIC, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name 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 (for Individual) AFSCME PA CN 13 Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 1408.95			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 08 / 2018 Transaction ID : SA11AI.207155 Amount of Each Receipt this Period 125.24 ☐ Memo Item
B. SHAFAT, MOHAMED, I., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 430 30th Street Northwest #305 City Willmar State MN Zip Code 56201 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME MN CN 5/STATE OF MN Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 01 / 2018 Transaction ID : SA11AI.211762 Amount of Each Receipt this Period 20.00 ☐ Memo Item
C. SHAFER, TIMOTHY, P., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name 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 (for Individual) AFSCME OH LOC 11 Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 840.00			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 06 / 2018 Transaction ID : SA11AI.210504 Amount of Each Receipt this Period 70.00 ☐ Memo Item
SUBTOTAL of Receipts This Page (optional)..... ▶			215.24
TOTAL This Period (last page this line number only)..... ▶			

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1104 OF 1411

(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. SHANAHAN, ALAN, , ,

Mailing Address 26830 Vista Allegre

City

Moreno Valley

State

CA

Zip Code

92555

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME CA LOC 1902

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 19 / 2018

Transaction ID : SA11AI.211069

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHANAHAN, ALAN, , ,

Mailing Address 26830 Vista Allegre

City

Moreno Valley

State

CA

Zip Code

92555

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME CA LOC 1902

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211090

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHANAHAN, ALAN, , ,

Mailing Address 26830 Vista Allegre

City

Moreno Valley

State

CA

Zip Code

92555

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME CA LOC 1902

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 20 / 2018

Transaction ID : SA11AI.211111

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1105 OF 1411

(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. SHANNON, RYAN, M., ,

Mailing Address 80 Swan Way
Suite 110

City
Oakland

State
CA

Zip Code
94621

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA CN 57

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 18 / 2018

Transaction ID : SA11AI.211204

Amount of Each Receipt this Period

19.24

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHANNON, RYAN, M., ,

Mailing Address 80 Swan Way
Suite 110

City
Oakland

State
CA

Zip Code
94621

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA CN 57

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.88

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211247

Amount of Each Receipt this Period

19.24

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHARP, ERIC, , ,

Mailing Address 6800 N. High Street

City
Worthington

State
OH

Zip Code
43085

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

270.79

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210941

Amount of Each Receipt this Period

20.83

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

59.31

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1106 OF 1411

(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. SHAW, VALERIE, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 26 / 2018 Transaction ID : SA11AI.209210	
Mailing Address 3936 Cone Court			Amount of Each Receipt this Period 10.00	
City Dayton	State OH	Zip Code 45417	☐ Memo Item	
FEC ID number of contributing federal political committee. C 			Aggregate Year-to-Date ▼ 220.00	
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH			Occupation (for Individual) ACCOUNT CLERK II	
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼			Aggregate Year-to-Date ▼ 230.00	
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SHAW, VALERIE, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 09 / 2018 Transaction ID : SA11AI.209841	
Mailing Address 3936 Cone Court			Amount of Each Receipt this Period 10.00	
City Dayton	State OH	Zip Code 45417	☐ Memo Item	
FEC ID number of contributing federal political committee. C 			Aggregate Year-to-Date ▼ 240.00	
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH			Occupation (for Individual) ACCOUNT CLERK II	
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼			Aggregate Year-to-Date ▼ 240.00	
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SHAW, VALERIE, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 23 / 2018 Transaction ID : SA11AI.210505	
Mailing Address 3936 Cone Court			Amount of Each Receipt this Period 10.00	
City Dayton	State OH	Zip Code 45417	☐ Memo Item	
FEC ID number of contributing federal political committee. C 			Aggregate Year-to-Date ▼ 240.00	
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH			Occupation (for Individual) ACCOUNT CLERK II	
Receipt For: ☐ Primary ☐ General ☐ Other (specify)			Aggregate Year-to-Date ▼ 240.00	
SUBTOTAL of Receipts This Page (optional).....			 30.00	
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 1107 OF 1411

(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. SHAW-SAMUELS, LATASHIA, , ,

Mailing Address 9316 Palmer Place

City
Laurel

State
MD

Zip Code
20708

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

EDUCATION COORDINATOR I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206452

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHAW-SAMUELS, LATASHIA, , ,

Mailing Address 9316 Palmer Place

City
Laurel

State
MD

Zip Code
20708

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

EDUCATION COORDINATOR I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206836

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHAWBER, TROY, J., ,

Mailing Address 1789 State Route 598

City
Galion

State
OH

Zip Code
44833

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

HIGHWAY TECHNICIAN I

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209211

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1108 OF 1411

(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. SHAWBER, TROY, J., ,

Mailing Address 1789 State Route 598

City
GalionState
OHZip Code
44833FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
HIGHWAY TECHNICIAN I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209842

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHAWBER, TROY, J., ,

Mailing Address 1789 State Route 598

City
GalionState
OHZip Code
44833FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
HIGHWAY TECHNICIAN I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210506

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHEEHAN, ZOE, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	25	2018

Transaction ID : SA11AI.207516

Amount of Each Receipt this Period

11.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

31.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1109 OF 1411

(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. SHEEHAN, ZOE, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.207718

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHEEHAN, ZOE, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2018

Transaction ID : SA11AI.207953

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHELTON, CLARENCE, A., ,

Mailing Address 5918 Westbank Drive

City
GallowayState
OHZip Code
43119FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2018

Transaction ID : SA11AI.209212

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

32.00

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 1110 OF 1411

(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. SHELTON, CLARENCE, A., ,

Mailing Address 5918 Westbank Drive

City
Galloway

State
OH

Zip Code
43119

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 ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209843

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHELTON, CLARENCE, A., ,

Mailing Address 5918 Westbank Drive

City
Galloway

State
OH

Zip Code
43119

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 ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210507

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHELTON, PAMELA, S., ,

Mailing Address 4471 North Leavitt Road NW

City
Warren

State
OH

Zip Code
44485

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

597.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 23 / 2018

Transaction ID : SA11AI.210836

Amount of Each Receipt this Period

19.23

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

39.23

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1111 OF 1411

(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. SHELTON, PAMELA, S., ,

Mailing Address 4471 North Leavitt Road NW

City
WarrenState
OHZip Code
44485FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

616.58

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.210837

Amount of Each Receipt this Period

19.23

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHELTON, PAMELA, S., ,

Mailing Address 4471 North Leavitt Road NW

City
WarrenState
OHZip Code
44485FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

629.66

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	06	2018

Transaction ID : SA11AI.210857

Amount of Each Receipt this Period

13.08

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHELTON, PAMELA, S., ,

Mailing Address 4471 North Leavitt Road NW

City
WarrenState
OHZip Code
44485FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

648.89

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	13	2018

Transaction ID : SA11AI.210838

Amount of Each Receipt this Period

19.23

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

51.54

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1112 OF 1411

(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. SHELTON, PAMELA, S., ,

Mailing Address 4471 North Leavitt Road NW

City
Warren

State
OH

Zip Code
44485

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH CN 8

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

668.12

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.210942

Amount of Each Receipt this Period

19.23

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHEPHERD, DEBORAH, C., ,

Mailing Address 1011 E Franklin Avenue

City
Indianola

State
IA

Zip Code
50125

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)

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
10 / 18 / 2018

Transaction ID : SA11AI.211859

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHEPHERD, DEBORAH, C., ,

Mailing Address 1011 E Franklin Avenue

City
Indianola

State
IA

Zip Code
50125

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)

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
10 / 26 / 2018

Transaction ID : SA11AI.211928

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

39.23

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1113 OF 1411

(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. SHERROD, MARCUS, E., ,

Mailing Address 2073 Henley Road

City
SpringfieldState
ILZip Code
62702FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
PUBLIC SERVICE ADMIN.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2018			

Transaction ID : SA11AI.208336

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHILLING, LISA, A., ,

Mailing Address 521 E Church Street

City
GalionState
OHZip Code
44833FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ODJFS CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2018			

Transaction ID : SA11AI.209213

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHILLING, LISA, A., ,

Mailing Address 521 E Church Street

City
GalionState
OHZip Code
44833FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ODJFS CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

364.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			09			2018			

Transaction ID : SA11AI.209844

Amount of Each Receipt this Period

19.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

88.00

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 1114 OF 1411

(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. SHILLING, LISA, A, ,

Mailing Address 521 E Church Street

City
Galion

State
OH

Zip Code
44833

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ODJFS CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

383.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210508

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHIMKO, JOSEPH, M., ,

Mailing Address P.O. Box 645

City
Grindstone

State
PA

Zip Code
15442

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.207156

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHIVES, PATRICIA, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

212.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207719

Amount of Each Receipt this Period

18.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

77.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1115 OF 1411

(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. SHIVES, PATRICIA, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207954

Amount of Each Receipt this Period

18.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHOEMAKER, ANDREW, J., ,

Mailing Address 1196 Westdale Drive

City
Galloway

State
OH

Zip Code
43119

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209214

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHOEMAKER, ANDREW, J., ,

Mailing Address 1196 Westdale Drive

City
Galloway

State
OH

Zip Code
43119

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 ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209845

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

38.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1116 OF 1411

(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. SHOEMAKER, ANDREW, J., ,

Mailing Address 1196 Westdale Drive

City
GallowayState
OHZip Code
43119FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210509

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHONBORN, JAMES, R., ,

Mailing Address 18286 Hunter Road

City
GlousterState
OHZip Code
45732FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/OHIO UNIVERSITYOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	22	2018

Transaction ID : SA11AI.210839

Amount of Each Receipt this Period

9.62

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHONBORN, JAMES, R., ,

Mailing Address 18286 Hunter Road

City
GlousterState
OHZip Code
45732FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/OHIO UNIVERSITYOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

221.26

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.210840

Amount of Each Receipt this Period

9.62

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

29.24

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1117 OF 1411

(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. SHONBORN, JAMES, R., ,

Mailing Address 18286 Hunter Road

City
Glouster

State
OH

Zip Code
45732

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/OHIO UNIVERSITY

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.88

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2018

Transaction ID : SA11AI.210943

Amount of Each Receipt this Period

9.62

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHORTER, BRENNAN, S., ,

Mailing Address 2020 14th Street
Apt. 302

City
Cloquet

State
MN

Zip Code
55720

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
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
11 / 01 / 2018

Transaction ID : SA11AI.211763

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHOUP, GARY, D., ,

Mailing Address 1275 Coal Road

City
New Florence

State
PA

Zip Code
15944

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)
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
10 / 31 / 2018

Transaction ID : SA11AI.207157

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

49.62

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1118 OF 1411

(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. SHUMAKER, DEBRA, G., ,

Mailing Address 42 Lexington Place

City

Youngstown

State

OH

Zip Code

44515

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 ▼

290.40

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209215

Amount of Each Receipt this Period

13.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHUMAKER, DEBRA, G., ,

Mailing Address 42 Lexington Place

City

Youngstown

State

OH

Zip Code

44515

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 ▼

303.60

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209846

Amount of Each Receipt this Period

13.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHUMAKER, DEBRA, G., ,

Mailing Address 42 Lexington Place

City

Youngstown

State

OH

Zip Code

44515

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 ▼

316.80

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210510

Amount of Each Receipt this Period

13.20

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

39.60

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1119 OF 1411

(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. SHUMAKER, JEREMY, R., ,

Mailing Address 410 Colerain Street

City
SligoState
PAZip Code
16255FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PAOccupation (for Individual)
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
10 / 31 / 2018

Transaction ID : SA11AI.207158

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHUTE, CARMYN, L., ,

Mailing Address 300 E Uncas Road

City

Port Townsend

State

WA

Zip Code

98368

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 25 / 2018

Transaction ID : SA11AI.207518

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHUTE, CARMYN, L., ,

Mailing Address 300 E Uncas Road

City

Port Townsend

State

WA

Zip Code

98368

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
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
11 / 09 / 2018

Transaction ID : SA11AI.207720

Amount of Each Receipt this Period

12.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

44.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1120 OF 1411

(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. SHUTE, CARMYN, L., ,

Mailing Address 300 E Uncas Road

City

Port Townsend

State

WA

Zip Code

98368

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M	M	M	D	D	D	Y	Y	Y	Y	Y	Y
1	1	1	2	6		2	0	1	8		

Transaction ID : SA11AI.207955

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SIAS, BRYNN, M., ,Mailing Address 3651 Warder Street NW
Unit 2A

City

Washington

State

DC

Zip Code

20010

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

POLITICAL ACTION REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.19

Date of Receipt

M	M	M	D	D	D	Y	Y	Y	Y	Y	Y
1	0		3	1		2	0	1	8		

Transaction ID : SA11AI.206453

Amount of Each Receipt this Period

30.19

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SIAS, BRYNN, M., ,Mailing Address 3651 Warder Street NW
Unit 2A

City

Washington

State

DC

Zip Code

20010

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

POLITICAL ACTION REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

428.38

Date of Receipt

M	M	M	D	D	D	Y	Y	Y	Y	Y	Y
1	1		1	5		2	0	1	8		

Transaction ID : SA11AI.206837

Amount of Each Receipt this Period

30.19

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

72.38

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1121 OF 1411

(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. SIAS, ZACHARY, , ,

Mailing Address 300 Hardman Avenue South

City

South Saint Paul

State

MN

Zip Code

55075

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MN CN 5/CN14

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

502.05

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211764

Amount of Each Receipt this Period

50.76

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SIBERIO, SEAN, , ,

Mailing Address 3534 Harriet Avenue
Apt. 2

City

Minneapolis

State

MN

Zip Code

55408

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211765

Amount of Each Receipt this Period

16.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SIDELINGER, GEOFFREY, A., ,

Mailing Address 1063 River Road

City

Weedville

State

PA

Zip Code

15868

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.207159

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

106.76

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1122 OF 1411

(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. SIDWELL, SUSAN, , ,

Mailing Address 60 Winter Hill Circle

City
Montgomery

State
IL

Zip Code
60538

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
EDUCATOR REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208337

Amount of Each Receipt this Period

22.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SIELING, TAYLOR, J., ,

Mailing Address 559 N Maple Street
Apt. C

City
Ellsworth

State
WI

Zip Code
54011

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211766

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SIERRAS, JASON, , ,

Mailing Address 55 Lake Havasu Avenue
Suite F-280

City
Lake Havasu City

State
AZ

Zip Code
86403

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 1902

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 19 / 2018

Transaction ID : SA11AI.211070

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

92.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1123 OF 1411

(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. SIERRAS, JASON, , ,Mailing Address 55 Lake Havasu Avenue
Suite F-280

City

Lake Havasu City

State

AZ

Zip Code

86403

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME CA LOC 1902

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2018

Transaction ID : SA11AI.211091

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SIERRAS, JASON, , ,Mailing Address 55 Lake Havasu Avenue
Suite F-280

City

Lake Havasu City

State

AZ

Zip Code

86403

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME CA LOC 1902

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	20	/	2018

Transaction ID : SA11AI.211112

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SIGMAN, JEFFREY, A., ,

Mailing Address 4366 Gims Road

City

Portsmouth

State

OH

Zip Code

45662

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

NATRL RESOURCES TECH

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2018

Transaction ID : SA11AI.209216

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

110.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1124 OF 1411

(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. SIGMAN, JEFFREY, A., ,

Mailing Address 4366 Gims Road

City
Portsmouth

State
OH

Zip Code
45662

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
NATRL RESOURCES TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209847

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SIGMAN, JEFFREY, A., ,

Mailing Address 4366 Gims Road

City
Portsmouth

State
OH

Zip Code
45662

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
NATRL RESOURCES TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210511

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SILVA, BUDDY, , ,

Mailing Address 89 640 Haleakala Avenue

City
Waianae

State
HI

Zip Code
96792

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 646

Occupation (for Individual)
STAFF 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
11 / 09 / 2018

Transaction ID : SA11AI.211291

Amount of Each Receipt this Period

21.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

41.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1125 OF 1411

(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. SILVA, ROWENA, L., ,

Mailing Address 888 Mililani Street
Suite 601

City
Honolulu

State
HI

Zip Code
96813-2991

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI RET CHPT 152

Occupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211047

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SILWANI, JANE, M., ,

Mailing Address 3823 Grove city Road

City
Grove City

State
OH

Zip Code
43123

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
SOFTWARE DEVELOPMENT REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209217

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SILWANI, JANE, M., ,

Mailing Address 3823 Grove city Road

City
Grove City

State
OH

Zip Code
43123

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
SOFTWARE DEVELOPMENT REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209848

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1126 OF 1411

(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. SILWANI, JANE, M., ,

Mailing Address 3823 Grove city Road

City

Grove City

State

OH

Zip Code

43123

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

SOFTWARE DEVELOPMENT REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210512

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SIMMONS, KARRIE, E., ,

Mailing Address 14448 S Marquette Avenue

City

Burnham

State

IL

Zip Code

60633

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.11

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 18 / 2018

Transaction ID : SA11AI.211806

Amount of Each Receipt this Period

20.83

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SIMMONS, KARRIE, E., ,

Mailing Address 14448 S Marquette Avenue

City

Burnham

State

IL

Zip Code

60633

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

437.43

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208338

Amount of Each Receipt this Period

83.32

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

114.15

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1127 OF 1411

(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. SIMON, CINDY, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				26				2018					

Transaction ID : SA11AI.207956

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SIMONS, RONNIE, L., ,

Mailing Address 9308 Road 5

City
LeipsicState
OHZip Code
45856FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

407.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				26				2018					

Transaction ID : SA11AI.209218

Amount of Each Receipt this Period

18.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SIMONS, RONNIE, L., ,

Mailing Address 9308 Road 5

City
LeipsicState
OHZip Code
45856FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.50

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				09				2018					

Transaction ID : SA11AI.209849

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)..... ►

47.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1128 OF 1411

(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. SIMONS, RONNIE, L., ,

Mailing Address 9308 Road 5

City
Leipsic

State
OH

Zip Code
45856

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 ▼

444.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210513

Amount of Each Receipt this Period

18.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SIMPSON, VALERIE, ., ,

Mailing Address 1308 Cedar Street

City
Lima

State
OH

Zip Code
45804

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 ▼

204.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210514

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SIROIN, CHARLENE, J., ,

Mailing Address 19465 Evening Star Way

City
Farmington

State
MN

Zip Code
55024

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 01 / 2018

Transaction ID : SA11AI.211767

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

47.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1129 OF 1411

(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. SISSEL, JUANITA, S., ,

Mailing Address 1725 7th Street

City
Portsmouth

State
OH

Zip Code
45662

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 ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209220

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SISSEL, JUANITA, S., ,

Mailing Address 1725 7th Street

City
Portsmouth

State
OH

Zip Code
45662

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 ▼

322.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209851

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SISSEL, JUANITA, S., ,

Mailing Address 1725 7th Street

City
Portsmouth

State
OH

Zip Code
45662

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 ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210515

Amount of Each Receipt this Period

14.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

42.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1130 OF 1411

(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. SISTOZA, RACHEL, Z., ,

Mailing Address 13164 Oak Farm Drive

City
WoodbridgeState
VAZip Code
22192FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
OFFICE ASSISTANT IV

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

771.91

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206454

Amount of Each Receipt this Period

38.75

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SISTOZA, RACHEL, Z., ,

Mailing Address 13164 Oak Farm Drive

City
WoodbridgeState
VAZip Code
22192FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
OFFICE ASSISTANT IV

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

810.66

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	15	2018

Transaction ID : SA11AI.206838

Amount of Each Receipt this Period

38.75

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SKOK, ROBERTA, J., ,Mailing Address 775 Township Road
#2204City
PerrysvilleState
OHZip Code
44864FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1032.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	06	2018

Transaction ID : SA11AI.210944

Amount of Each Receipt this Period

94.24

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

171.74

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1131 OF 1411

(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. SKULTETY, BREANNE, N., ,Mailing Address 1432 12th Street NW
Apt. #1City
WashingtonState
DCZip Code
20005FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
LABOR ECONOMIST I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.99

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2018			

Transaction ID : SA11AI.206455

Amount of Each Receipt this Period

32.96

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SKULTETY, BREANNE, N., ,Mailing Address 1432 12th Street NW
Apt. #1City
WashingtonState
DCZip Code
20005FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
LABOR ECONOMIST I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

684.62

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2018			

Transaction ID : SA11AI.206839

Amount of Each Receipt this Period

33.63

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SKULTETY, TERRY, , ,

Mailing Address 222 Meade Street

City
Homer CityState
PAZip Code
15748FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

901.83

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			08			2018			

Transaction ID : SA11AI.207160

Amount of Each Receipt this Period

78.42

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

145.01

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1132 OF 1411

(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. SKYLES, DANIEL, W., ,

Mailing Address 7651 Rome Court

City
HollandState
OHZip Code
43528FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	6		2	0	1	8

Transaction ID : SA11AI.209221

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SKYLES, DANIEL, W., ,

Mailing Address 7651 Rome Court

City
HollandState
OHZip Code
43528FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	9		2	0	1	8

Transaction ID : SA11AI.209852

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SKYLES, DANIEL, W., ,

Mailing Address 7651 Rome Court

City
HollandState
OHZip Code
43528FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	3		2	0	1	8

Transaction ID : SA11AI.210516

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

39.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1133 OF 1411

(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. SLOAN, COLIN, T., ,

Mailing Address 617 5th Street S

City
MoorheadState
MNZip Code
56560FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MNOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	01	2018

Transaction ID : SA11AI.211768

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SLOAN, JONATHAN, , ,

Mailing Address 1426 North School Street

City
HonoluluState
HIZip Code
96817FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 646Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	14	2018

Transaction ID : SA11AI.211292

Amount of Each Receipt this Period

41.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SLOANE, ALEXANDER, L., ,Mailing Address 9700 Portland Avenue S
Unit 225City
MinneapolisState
MNZip Code
55420FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MNOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	01	2018

Transaction ID : SA11AI.211769

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

81.67

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1134 OF 1411

(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. SLONE, BENJAMIN, C., ,

Mailing Address 1195 Teens Run Road

City
Crown CityState
OHZip Code
45623FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
HIGHWAY TECHNICIAN II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210517

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SLUDER, KEVIN, D., , SR.

Mailing Address 2232 Drex Avenue

City
NorwoodState
OHZip Code
45212FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/METROHEALTHOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.64

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.210945

Amount of Each Receipt this Period

28.83

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMALLS, CINDY, , ,

Mailing Address 335 Assembly Point Court

City
OdentonState
MDZip Code
21113FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
POLITICAL ACTION REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1054.89

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206456

Amount of Each Receipt this Period

50.26

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

87.59

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1135 OF 1411

(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. SMALLS, CINDY, , ,

Mailing Address 335 Assembly Point Court

City
Odenton

State
MD

Zip Code
21113

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
POLITICAL ACTION REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1105.15

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206840

Amount of Each Receipt this Period

50.26

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITH, ANDREW, H., ,

Mailing Address 107 Empire Drive

City
Gahanna

State
OH

Zip Code
43230

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
LABORATORY SCIENTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209223

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMITH, ANDREW, H., ,

Mailing Address 107 Empire Drive

City
Gahanna

State
OH

Zip Code
43230

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
LABORATORY SCIENTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209854

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.26

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1136 OF 1411

(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. SMITH, ANDREW, H., ,

Mailing Address 107 Empire Drive

City
GahannaState
OHZip Code
43230FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
LABORATORY SCIENTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210518

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITH, ASHAYLA, N., ,

Mailing Address 2036 Edgewood Drive

City
LimaState
OHZip Code
45805FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.209855

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMITH, ASHAYLA, N., ,

Mailing Address 2036 Edgewood Drive

City
LimaState
OHZip Code
45805FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210519

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

28.00

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 1137 OF 1411

(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. SMITH, ASHLEY, , ,

Mailing Address 1517 Sun Court

City

Rockford

State

IL

Zip Code

61104

FEC ID number of contributing
federal political committee.

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

BUS DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.208339

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITH, BRITANNY, J., ,
Mailing Address 2115 South Street
Apt. 305

City

Philadelphia

State

PA

Zip Code

19146

FEC ID number of contributing
federal political committee.

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

POLITICAL ACTION REP I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.206457

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMITH, BRITANNY, J., ,
Mailing Address 2115 South Street
Apt. 305

City

Philadelphia

State

PA

Zip Code

19146

FEC ID number of contributing
federal political committee.

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

POLITICAL ACTION REP I

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.206841

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1138 OF 1411

(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. SMITH, CHARLES, O., ,

Mailing Address 319 Woodmont Drive

City
EnglewoodState
OHZip Code
45322FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
MAINTENANCE REPAIR TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.209225

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITH, CHARLES, O., ,

Mailing Address 319 Woodmont Drive

City
EnglewoodState
OHZip Code
45322FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
MAINTENANCE REPAIR TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209856

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMITH, CHARLES, O., ,

Mailing Address 319 Woodmont Drive

City
EnglewoodState
OHZip Code
45322FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
MAINTENANCE REPAIR TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210520

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

30.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1139 OF 1411

☒ 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. SMITH, CONNIE, , ,

Mailing Address 1739 E 24th Street

City

Capitol Heights

State

IA

Zip Code

50317

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IA CN 61

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

586.60

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	18	2018

Transaction ID : SA11AI.211876

Amount of Each Receipt this Period

58.66

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITH, CONNIE, , ,

Mailing Address 1739 E 24th Street

City

Capitol Heights

State

IA

Zip Code

50317

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IA CN 61

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

645.26

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	06	2018

Transaction ID : SA11AI.211929

Amount of Each Receipt this Period

58.66

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMITH, DAVID, , ,

Mailing Address 1 Riverside Drive

City

Athens

State

OH

Zip Code

45701

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH CN 8

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

282.87

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	22	2018

Transaction ID : SA11AI.210841

Amount of Each Receipt this Period

13.47

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

130.79

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1140 OF 1411

(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. SMITH, DAVID, , ,

Mailing Address 1 Riverside Drive

City
Athens

State
OH

Zip Code
45701

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.34

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.210946

Amount of Each Receipt this Period

13.47

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITH, DEREK, L., ,

Mailing Address 4306 Broken Arrow Court

City
Clinton

State
MD

Zip Code
20735

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ASSISTANT DIRECTOR, GENERAL S

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1072.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206458

Amount of Each Receipt this Period

51.35

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMITH, DEREK, L., ,

Mailing Address 4306 Broken Arrow Court

City
Clinton

State
MD

Zip Code
20735

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ASSISTANT DIRECTOR, GENERAL SE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1123.35

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206842

Amount of Each Receipt this Period

51.35

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

116.17

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1141 OF 1411

(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. SMITH, DERRICK, L., ,

Mailing Address 1974 Shaftesbury Road

City
Dayton

State
OH

Zip Code
45406

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209226

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITH, DERRICK, L., ,

Mailing Address 1974 Shaftesbury Road

City
Dayton

State
OH

Zip Code
45406

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 ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209857

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMITH, DERRICK, L., ,

Mailing Address 1974 Shaftesbury Road

City
Dayton

State
OH

Zip Code
45406

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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210521

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1142 OF 1411

(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. SMITH, EMMAGEAN, , ,

Mailing Address 1436 Minosa Lane

City

West Salem

State

OH

Zip Code

44287

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 ▼

319.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2018

Transaction ID : SA11AI.209227

Amount of Each Receipt this Period

14.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITH, EMMAGEAN, , ,

Mailing Address 1436 Minosa Lane

City

West Salem

State

OH

Zip Code

44287

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 ▼

333.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		09		2018

Transaction ID : SA11AI.209858

Amount of Each Receipt this Period

14.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMITH, EMMAGEAN, , ,

Mailing Address 1436 Minosa Lane

City

West Salem

State

OH

Zip Code

44287

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 ▼

348.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		23		2018

Transaction ID : SA11AI.210522

Amount of Each Receipt this Period

14.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

43.50

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 1143 OF 1411

(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. SMITH, GREGORY, A., ,

Mailing Address 184 Woodbine Drive

City
Ontario

State
OH

Zip Code
44906

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HIGHWAY TECHNICIAN III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209228

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITH, GREGORY, A., ,

Mailing Address 184 Woodbine Drive

City
Ontario

State
OH

Zip Code
44906

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HIGHWAY TECHNICIAN III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209859

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMITH, GREGORY, A., ,

Mailing Address 184 Woodbine Drive

City
Ontario

State
OH

Zip Code
44906

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HIGHWAY TECHNICIAN III

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210523

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1144 OF 1411

(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. SMITH, KATIE, L., ,

Mailing Address 13813 Castle Blvd.
#13

City
Silver Spring

State
MD

Zip Code
20904

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
LEGISLATIVE AFFAIRS SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

676.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206459

Amount of Each Receipt this Period

34.49

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITH, KATIE, L., ,

Mailing Address 13813 Castle Blvd.
#13

City
Silver Spring

State
MD

Zip Code
20904

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
LEGISLATIVE AFFAIRS SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

711.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206843

Amount of Each Receipt this Period

34.49

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMITH, MARGARET, A., ,

Mailing Address 3994 Andrus Court
Apt. A

City
Columbus

State
OH

Zip Code
43227

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ADMINISTRATIVE PROFESSIONAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209229

Amount of Each Receipt this Period

14.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

83.48

X	11a		11b		11c		12		
	13		14		15		16		17

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

FEC Schedule A (Form 3X) Rev. 06/2016

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1146 OF 1411

(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. SMITH, MARK, D., ,

Mailing Address 816 Roberts Terrace

City
MarshalltownState
IAZip Code
50158FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/STATE OF IAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.211930

Amount of Each Receipt this Period

12.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITH, MELISSA, B ., ,

Mailing Address 1762 S Fountain Avenue

City
SpringfieldState
OHZip Code
45506FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
FINANCIAL ASSOCIATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210525

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMITH, MICHELLE, L., ,

Mailing Address 2100 Stonepath Street

City
LorainState
OHZip Code
44052FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ODJFS CUSTOMER SERVICE REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

760.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.209231

Amount of Each Receipt this Period

38.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

59.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1147 OF 1411

(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. SMITH, MICHELLE, L., ,

Mailing Address 2100 Stonepath Street

City
LorainState
OHZip Code
44052FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ODJFS CUSTOMER SERVICE REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

798.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		09		2018

Transaction ID : SA11AI.209862

Amount of Each Receipt this Period

38.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITH, MICHELLE, L., ,

Mailing Address 2100 Stonepath Street

City
LorainState
OHZip Code
44052FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ODJFS CUSTOMER SERVICE REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

836.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		23		2018

Transaction ID : SA11AI.210526

Amount of Each Receipt this Period

38.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMITH, SHALONDA, M., ,

Mailing Address 2514 Eastern Pine Road

City
ColumbusState
OHZip Code
43232FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		23		2018

Transaction ID : SA11AI.210527

Amount of Each Receipt this Period

8.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

84.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1148 OF 1411

(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. SMITH, TAMMY, , ,

Mailing Address 1021 College Avenue

City
AltonState
ILZip Code
62002FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
SEC THERAPY AIDE I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.50

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208340

Amount of Each Receipt this Period

31.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITH, TRAVIS, E., ,

Mailing Address 6 Baker Street

City
RushvilleState
ILZip Code
62681FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
SEC THERAPY AIDE II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.96

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208341

Amount of Each Receipt this Period

41.68

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMITH, WILLIAM, A., ,

Mailing Address 307 Back Road

City
New BethlehemState
PAZip Code
16242FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.207162

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

93.18

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 1149 OF 1411

(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. **SMOCK, KRISTEN, M., ,**

Mailing Address 316 West Cherry Street

City
New Castle

State
PA

Zip Code
16102

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/NSP/LOCAL 2902

Occupation (for Individual)
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
11 / 08 / 2018

Transaction ID : SA11AI.207163

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **SMOLKO, MARGARET, , ,**

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 ▼

324.54

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207164

Amount of Each Receipt this Period

31.26

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **SMUDDE, CHRISTOPHER, , ,**

Mailing Address 1821 Clearview Drive

City
Springfield

State
IL

Zip Code
62704

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31

Occupation (for Individual)
MIS SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

848.91

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208342

Amount of Each Receipt this Period

85.06

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

126.32

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1150 OF 1411

(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. SMYERS, ERICA, D., ,

Mailing Address 2618 State Road

City
VermilionState
OHZip Code
44089FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CUSTODIAL WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.209233

Amount of Each Receipt this Period

14.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMYERS, ERICA, D., ,

Mailing Address 2618 State Road

City
VermilionState
OHZip Code
44089FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CUSTODIAL WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.50

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209864

Amount of Each Receipt this Period

14.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMYERS, ERICA, D., ,

Mailing Address 2618 State Road

City
VermilionState
OHZip Code
44089FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CUSTODIAL WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210528

Amount of Each Receipt this Period

14.50

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

43.50

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 1151 OF 1411

(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. SNIDER, BESSIE, , ,

Mailing Address 1034 N Washington Avenue

City
Lansing

State
MI

Zip Code
48906

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MI CN 25

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441.00

Date of Receipt

11 / 07 / 2018

Transaction ID : SA11AI.211348

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SNIDER, BESSIE, , ,

Mailing Address 1034 N Washington Avenue

City
Lansing

State
MI

Zip Code
48906

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MI CN 25

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.00

Date of Receipt

11 / 20 / 2018

Transaction ID : SA11AI.211399

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SNYDER, KATHARINA, A., ,

Mailing Address 823 Davis Street

City
Akron

State
OH

Zip Code
44310

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ENVIRONMENTAL SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

308.00

Date of Receipt

10 / 26 / 2018

Transaction ID : SA11AI.209234

Amount of Each Receipt this Period

14.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

56.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1152 OF 1411

(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. SNYDER, KATHARINA, A., ,

Mailing Address 823 Davis Street

City
Akron

State
OH

Zip Code
44310

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ENVIRONMENTAL SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209865

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SNYDER, KATHARINA, A., ,

Mailing Address 823 Davis Street

City
Akron

State
OH

Zip Code
44310

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ENVIRONMENTAL SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210529

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SNYDER, NORMAN, L., ,

Mailing Address 139 Sycamore Street East
#4

City
St. Paul

State
MN

Zip Code
55117

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/RAMSEY COUNTY

Occupation (for Individual)
COUNSELOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1625.00

Date of Receipt

11 / 01 / 2018

Transaction ID : SA11AI.211770

Amount of Each Receipt this Period

158.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

186.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1153 OF 1411

(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. SOLAIZA, STEVEN, , ,

Mailing Address 509 S Ocotillo Avenue

City
ParkerState
AZZip Code
85344FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 1902Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	19	2018

Transaction ID : SA11AI.211071

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SOLAIZA, STEVEN, , ,

Mailing Address 509 S Ocotillo Avenue

City
ParkerState
AZZip Code
85344FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 1902Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	07	2018

Transaction ID : SA11AI.211092

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SOLAIZA, STEVEN, , ,

Mailing Address 509 S Ocotillo Avenue

City
ParkerState
AZZip Code
85344FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 1902Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	20	2018

Transaction ID : SA11AI.211113

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1154 OF 1411

(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. SOLAND, DARCY, F., ,

Mailing Address 324 E Alcott Avenue

City

Fergus Falls

State

MN

Zip Code

56537

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MN CN 5

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	01	2018

Transaction ID : SA11AI.211771

Amount of Each Receipt this Period

20.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SOLLITTO, DOUGLAS, , ,

Mailing Address 210 Robins Avenue

City

Niles

State

OH

Zip Code

44446

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11

Occupation (for Individual)

CORRECTIONAL LAUNDRY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	06	2018

Transaction ID : SA11AI.210530

Amount of Each Receipt this Period

40.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SOSNOWSKI, JILL, A., ,

Mailing Address 155 Sanctuary Village Drive

City

Columbus

State

OH

Zip Code

43235

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

DISABILITY CLAIMS CORD.

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.209235

Amount of Each Receipt this Period

10.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

70.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1155 OF 1411

(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. SOSNOWSKI, JILL, A., ,

Mailing Address 155 Sanctuary Village Drive

City
ColumbusState
OHZip Code
43235FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
DISABILITY CLAIMS CORD.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209866

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SOSNOWSKI, JILL, A., ,

Mailing Address 155 Sanctuary Village Drive

City
ColumbusState
OHZip Code
43235FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
DISABILITY CLAIMS CORD.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210531

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SOTO, LORENZO, T., ,Mailing Address 11750 Old Georgetown Road
Apt. 2318City
RockvilleState
MDZip Code
20852FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
VIDEO EDITOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

626.64

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206460

Amount of Each Receipt this Period

28.73

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

48.73

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1156 OF 1411

(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. SOTO, LORENZO, T., ,Mailing Address 11750 Old Georgetown Road
Apt. 2318City
RockvilleState
MDZip Code
20852FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
VIDEO EDITOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

655.37

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2018

Transaction ID : SA11AI.206844

Amount of Each Receipt this Period

28.73

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SOTO, ROGELIO, R., ,

Mailing Address P.O. Box 1247

City
HonokaaState
HIZip Code
96727FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI RET CHPT 152Occupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2018

Transaction ID : SA11AI.211048

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SOTO, ROSA, I., ,

Mailing Address 11929 Jim Webb

City
El PasoState
TXZip Code
79934FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
ORGANIZER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

649.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2018

Transaction ID : SA11AI.206461

Amount of Each Receipt this Period

32.89

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

81.62

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 1157 OF 1411

(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. SOTO, ROSA, I., ,

Mailing Address 11929 Jim Webb

 City
 El Paso

 State
 TX

 Zip Code
 79934

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME INT'L

 Occupation (for Individual)
 ORGANIZER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.206845

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SOUTHWELL, HEATHER, , ,

Mailing Address 1200 Larchmont Drive

 City
 Springfield

 State
 IL

 Zip Code
 62704

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME IL CN 31/STATE OF IL

 Occupation (for Individual)
 REVENUE TAX SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.208343

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SPAHR, ROSE, M., ,

Mailing Address 178 Thorndale Drive

 City
 Beaver Falls

 State
 PA

 Zip Code
 15010

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME PA CN 13/STATE OF PA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.207165

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1158 OF 1411

(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. SPANN, DARRIN, , ,

Mailing Address 6130 Springford Drive
#C6

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 ▼

1302.45

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207166

Amount of Each Receipt this Period

106.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SPARKS, BILLIE, D ., ,

Mailing Address 726 Safford Avenue

City
Chillicothe

State
OH

Zip Code
45601

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
FINANCIAL ASSOCIATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209867

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SPARKS, BILLIE, D ., ,

Mailing Address 726 Safford Avenue

City
Chillicothe

State
OH

Zip Code
45601

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
FINANCIAL ASSOCIATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210532

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

124.30

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1159 OF 1411

(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. SPARKS, ELIZABETH, M., ,

Mailing Address 817 220th Street

City
BaldwinState
WIZip Code
54002FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

582.83

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206462

Amount of Each Receipt this Period

27.97

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SPARKS, ELIZABETH, M., ,

Mailing Address 817 220th Street

City
BaldwinState
WIZip Code
54002FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.80

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	15	2018

Transaction ID : SA11AI.206846

Amount of Each Receipt this Period

27.97

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SPEARS, JAMES, L., , JR.

Mailing Address 6402 Tunston Lane

City
CharlotteState
NCZip Code
28269FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
FIELD COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

989.40

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206463

Amount of Each Receipt this Period

45.72

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

101.66

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1160 OF 1411

(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. SPEARS, JAMES, L., , JR.

Mailing Address 6402 Tunston Lane

City
CharlotteState
NCZip Code
28269FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
FIELD COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1036.38

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2018

Transaction ID : SA11AI.206847

Amount of Each Receipt this Period

46.98

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SPEARS, VICKIE, L., ,

Mailing Address 223 Gilcher Court

City
SanduskyState
OHZip Code
44870FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
LAUNDRY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2018

Transaction ID : SA11AI.209237

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SPEARS, VICKIE, L., ,

Mailing Address 223 Gilcher Court

City
SanduskyState
OHZip Code
44870FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
LAUNDRY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

253.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.209868

Amount of Each Receipt this Period

11.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

68.98

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1161 OF 1411

(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. SPEARS, VICKIE, L., ,

Mailing Address 223 Gilcher Court

City
Sandusky

State
OH

Zip Code
44870

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
LAUNDRY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210533

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SPEED, MELISSA, , ,

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 (for Individual)
AFSCME IA CN 61

Occupation (for Individual)
ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.80

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 18 / 2018

Transaction ID : SA11AI.211877

Amount of Each Receipt this Period

47.58

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SPEED, MELISSA, , ,

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 (for Individual)
AFSCME IA CN 61

Occupation (for Individual)
ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

523.38

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.211931

Amount of Each Receipt this Period

47.58

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

106.16

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 1162 OF 1411

(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. SPELICH, LISA, D., ,

Mailing Address 160 High Street NW

City
Warren

State
OH

Zip Code
44481

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH CN 8/TRUMBULL

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210947

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SPENCER, KELLY, I., ,

Mailing Address 1149 W Edwards

City
Springfield

State
IL

Zip Code
62704

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

OFFICE SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208344

Amount of Each Receipt this Period

48.40

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SPENCER, KYLE, A., ,

Mailing Address 524 North West Street

City
Galesburg

State
IL

Zip Code
61401

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

CORRECTIONAL OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208345

Amount of Each Receipt this Period

84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

142.40

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1163 OF 1411

(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. SPENCER, ROBERT, , ,

Mailing Address 1475 Via Mesa

City
San LorenzoState
CAZip Code
94580FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA CN 57Occupation (for Individual)
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
10			24			2018			

Transaction ID : SA11AI.211248

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SPICER, ABBY, N., ,

Mailing Address 165 Street Francis Avenue NW

City
BethelState
MNZip Code
55005FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MNOccupation (for Individual)
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
11			01			2018			

Transaction ID : SA11AI.211772

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SPIEGEL, AMY, , ,

Mailing Address P.O. Box 2696

City
YelmState
WAZip Code
98597FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28Occupation (for Individual)
DIRECTOR OF NEGOTIATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			14			2018			

Transaction ID : SA11AI.207960

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

60.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1164 OF 1411

(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. SPIEGEL, KURT, M., ,

Mailing Address P.O. Box 2696

City
YelmState
WAZip Code
98597FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28Occupation (for Individual)
FIELD SUPERVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	14	/	2018

Transaction ID : SA11AI.207961

Amount of Each Receipt this Period

22.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SPRAGGINS, PHYLLIS, L., ,

Mailing Address 1310 Redbud Place

City
LorainState
OHZip Code
44053FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.209869

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SPRAGGINS, PHYLLIS, L., ,

Mailing Address 1310 Redbud Place

City
LorainState
OHZip Code
44053FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210534

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

40.00

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 1165 OF 1411

(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. SPRAGUE, JUDITH, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
10 / 25 / 2018

Transaction ID : SA11AI.207520

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SPRAGUE, JUDITH, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207722

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SPRAGUE, JUDITH, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF 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
11 / 26 / 2018

Transaction ID : SA11AI.207962

Amount of Each Receipt this Period

10.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

31.50

X	11a		11b		11c		12		
	13		14		15		16		17

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

FEC Schedule A (Form 3X) Rev. 06/2016

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 1167 OF 1411

(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. ST. AORO, THERESA, A., ,

 Mailing Address 1545 Hamline Avenue N
 West Unit

City St. Paul	State MN	Zip Code 55108

FEC ID number of contributing federal political committee.

 Name of Employer (for Individual)
 AFSCME MN CN 5/STATE OF MN

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2018

Transaction ID : SA11AI.211773

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ST. GERMAINE, CHRISTINA, E., ,

Mailing Address 1429 Ivy Street

City Duluth	State MN	Zip Code 55811

FEC ID number of contributing federal political committee.

 Name of Employer (for Individual)
 AFSCME MN CN 5/STATE OF MN

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2018

Transaction ID : SA11AI.211774

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STANDING, BRIAN, , ,

Mailing Address 3210 James Street

City Madison	State WI	Zip Code 53714

FEC ID number of contributing federal political committee.

 Name of Employer (for Individual)
 AFSCME WI CN 32/DANE COUNTY

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2018

Transaction ID : SA11AI.211426

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1168 OF 1411

(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. STANDING, BRIAN, , ,

Mailing Address 3210 James Street

City
MadisonState
WIZip Code
53714FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WI CN 32/DANE COUNTYOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	01	2018

Transaction ID : SA11AI.211427

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STANDING, BRIAN, , ,

Mailing Address 3210 James Street

City
MadisonState
WIZip Code
53714FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WI CN 32/DANE COUNTYOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	16	2018

Transaction ID : SA11AI.211451

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STANLEY, BEATRICE, , ,Mailing Address 516 E. Seminole Street
#19City
DwightState
ILZip Code
60420FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
LIBRARIAN I

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208347

Amount of Each Receipt this Period

84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

104.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1169 OF 1411

(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. STANLEY, JAMES, A, ,

Mailing Address 2939 Graham Road

City
Falls ChurchState
VAZip Code
22842FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
EXECUTIVE OFFICE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

852.60

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206465

Amount of Each Receipt this Period

41.38

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STANLEY, JAMES, A, ,

Mailing Address 2939 Graham Road

City
Falls ChurchState
VAZip Code
22842FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
EXECUTIVE OFFICE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

893.98

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	15	2018

Transaction ID : SA11AI.206849

Amount of Each Receipt this Period

41.38

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STANLEY, TRACY, , ,

Mailing Address 817 E 15th Circle

City
La CenterState
WAZip Code
98629FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/COMM COLLEGEOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	25	2018

Transaction ID : SA11AI.207521

Amount of Each Receipt this Period

16.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

99.26

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 1170 OF 1411

(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. STANLEY, TRACY, , ,

Mailing Address 817 E 15th Circle

City
La Center

State
WA

Zip Code
98629

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/COMM COLLEGE

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207723

Amount of Each Receipt this Period

16.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STANLEY, TRACY, , ,

Mailing Address 817 E 15th Circle

City
La Center

State
WA

Zip Code
98629

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/COMM COLLEGE

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207963

Amount of Each Receipt this Period

16.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STARK, DENISE, L., ,

Mailing Address 4241 Berkshire Drive SE
#4

City
Warren

State
OH

Zip Code
44484

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

212.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 23 / 2018

Transaction ID : SA11AI.210843

Amount of Each Receipt this Period

9.65

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

42.65

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1171 OF 1411

☒ 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. STARK, DENISE, L., ,Mailing Address 4241 Berkshire Drive SE
#4City
WarrenState
OHZip Code
44484FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.95

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			06			2018			

Transaction ID : SA11AI.210948

Amount of Each Receipt this Period

9.65

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STARK, KARL, U., ,Mailing Address 3828 Georgia Avenue NW
#409City
WashingtonState
DCZip Code
20011FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
LEGISLATIVE AFFAIRS SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

651.66

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2018			

Transaction ID : SA11AI.206466

Amount of Each Receipt this Period

33.63

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STARK, KARL, U., ,Mailing Address 3828 Georgia Avenue NW
#409City
WashingtonState
DCZip Code
20011FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
LEGISLATIVE AFFAIRS SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

685.29

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2018			

Transaction ID : SA11AI.206850

Amount of Each Receipt this Period

33.63

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

76.91

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1172 OF 1411

(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. STARKEY, JAMES, E., ,

Mailing Address 255 Edgewood Drive

City
MarionState
OHZip Code
43302FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.209239

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STARKEY, JAMES, E., ,

Mailing Address 255 Edgewood Drive

City
MarionState
OHZip Code
43302FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209870

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STARKEY, JAMES, E., ,

Mailing Address 255 Edgewood Drive

City
MarionState
OHZip Code
43302FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210535

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

30.00

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 1173 OF 1411

(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. STEARNS, CARISSA, D., ,

Mailing Address 113 North Parker Street

City
Warren

State
PA

Zip Code
16365

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 ▼

393.84

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207167

Amount of Each Receipt this Period

37.14

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STEELE, CHARLES, K., ,

Mailing Address 923 W Woodruff Avenue

City
Toledo

State
OH

Zip Code
43606

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209240

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STEELE, CHARLES, K., ,

Mailing Address 923 W Woodruff Avenue

City
Toledo

State
OH

Zip Code
43606

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

253.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209871

Amount of Each Receipt this Period

11.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

59.14

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1174 OF 1411

(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. STEELE, CHARLES, K., ,

Mailing Address 923 W Woodruff Avenue

City
ToledoState
OHZip Code
43606FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210536

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STEELE, KEVIN, T., ,

Mailing Address 8749 Township Road 34

City
GalionState
OHZip Code
44833FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210537

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STEGER, MARIANNE, , ,

Mailing Address 2930 Woodson Drive

City
HilliardState
OHZip Code
43026FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L/STATE STREETOccupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	02	2018

Transaction ID : SA11AI.206851

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

169.50

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1175 OF 1411

(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. STEICHEN, KATHY, A., ,Mailing Address 830 W. 18th Street
3rd Fl.City
ChicagoState
ILZip Code
60608FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31Occupation (for Individual)
PROJECT STAFF ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.40

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208348

Amount of Each Receipt this Period

83.34

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STEINER, DELPHINE, L., ,

Mailing Address 307 N Woodland Drive

City

Fergus Falls

State

MN

Zip Code

56537

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MNOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	01	2018

Transaction ID : SA11AI.211775

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STEINER, KYMBERLE, K., ,

Mailing Address 2265 S State Route 741

City

Lebanon

State

OH

Zip Code

45036

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
WORKERS COMP CLAIMS REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.209242

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

113.34

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1176 OF 1411

(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. STEINER, KYMBERLE, K., ,

Mailing Address 2265 S State Route 741

City
LebanonState
OHZip Code
45036FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
WORKERS COMP CLAIMS REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209873

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STEINER, KYMBERLE, K., ,

Mailing Address 2265 S State Route 741

City
LebanonState
OHZip Code
45036FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
WORKERS COMP CLAIMS REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210538

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STELOVICH, MICHELE, , ,Mailing Address 21114 77th Place West
Apt. #102City
EdmondsState
WAZip Code
98026FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

483.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	25	2018

Transaction ID : SA11AI.207522

Amount of Each Receipt this Period

27.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

47.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1177 OF 1411

(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. STELOVICH, MICHELE, , ,Mailing Address 21114 77th Place West
Apt. #102City
EdmondsState
WAZip Code
98026FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.207724

Amount of Each Receipt this Period

27.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STELOVICH, MICHELE, , ,Mailing Address 21114 77th Place West
Apt. #102City
EdmondsState
WAZip Code
98026FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

537.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	26	2018

Transaction ID : SA11AI.207964

Amount of Each Receipt this Period

27.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STEPHENS, LORI, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	25	2018

Transaction ID : SA11AI.207523

Amount of Each Receipt this Period

10.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

64.50

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 1178 OF 1411

(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. STEPHENS, LORI, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207725

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STEPHENS, LORI, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207965

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STEPP, KRISTIN, M., ,

Mailing Address 515 Dewey Avenue

City
Elyria

State
OH

Zip Code
44035

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 ▼

204.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210539

Amount of Each Receipt this Period

8.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

29.50

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 1179 OF 1411

(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. STEVENS, ANGELIQUE, , ,

Mailing Address 32649 Belle Road

City

Avon Lake

State

OH

Zip Code

44012

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

MAIL CLERK/SCREENER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210540

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STEVENS, MYRON, , ,

Mailing Address 14642 Norkay Lake Road

City

Brainerd

State

MN

Zip Code

56401

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211776

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STEVENSON, LEAH, D., ,

Mailing Address 1079 Irongate Lane

City

Whitehall

State

OH

Zip Code

43213

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 ▼

418.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209245

Amount of Each Receipt this Period

19.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

47.50

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 1180 OF 1411

(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. STEVENSON, LEAH, D., , Mailing Address 1079 Irongate Lane <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">City Whitehall</td> <td style="width: 16%;">State OH</td> <td style="width: 51%;">Zip Code 43213</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH</td> <td style="width: 67%;">Occupation (for Individual) CORRECTION OFFICER</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 437.00			City Whitehall	State OH	Zip Code 43213	Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) CORRECTION OFFICER	Date of Receipt M M / D D / Y Y Y Y 11 / 09 / 2018 Transaction ID : SA11AI.209876 Amount of Each Receipt this Period 19.00 ☐ Memo Item	
City Whitehall	State OH	Zip Code 43213							
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) CORRECTION OFFICER								
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. STEVENSON, LEAH, D., , Mailing Address 1079 Irongate Lane <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">City Whitehall</td> <td style="width: 16%;">State OH</td> <td style="width: 51%;">Zip Code 43213</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH</td> <td style="width: 67%;">Occupation (for Individual) CORRECTION OFFICER</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 456.00			City Whitehall	State OH	Zip Code 43213	Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) CORRECTION OFFICER	Date of Receipt M M / D D / Y Y Y Y 11 / 23 / 2018 Transaction ID : SA11AI.210541 Amount of Each Receipt this Period 19.00 ☐ Memo Item	
City Whitehall	State OH	Zip Code 43213							
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) CORRECTION OFFICER								
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. STEWART, EARL, J., , Mailing Address 858 Old North Shore Road <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">City Two Harbors</td> <td style="width: 16%;">State MN</td> <td style="width: 51%;">Zip Code 55616</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">Name of Employer (for Individual) AFSCME MN CN 5/STATE OF MN</td> <td style="width: 67%;">Occupation (for Individual) STAFF REPRESENTATIVE</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) Aggregate Year-to-Date ▼ 220.00			City Two Harbors	State MN	Zip Code 55616	Name of Employer (for Individual) AFSCME MN CN 5/STATE OF MN	Occupation (for Individual) STAFF REPRESENTATIVE	Date of Receipt M M / D D / Y Y Y Y 11 / 01 / 2018 Transaction ID : SA11AI.211777 Amount of Each Receipt this Period 20.00 ☐ Memo Item	
City Two Harbors	State MN	Zip Code 55616							
Name of Employer (for Individual) AFSCME MN CN 5/STATE OF MN	Occupation (for Individual) STAFF REPRESENTATIVE								
SUBTOTAL of Receipts This Page (optional)..... ▶			58.00						
TOTAL This Period (last page this line number only)..... ▶									

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1181 OF 1411

(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. STEWART, EDWARD, , ,

Mailing Address 854 S Roys Avenue

City
ColumbusState
OHZip Code
43204FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
REPRODUCTION EQUIP OPERATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M	D D	Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210542

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STEWART, KATHLEEN, M., ,

Mailing Address 7326 State Route 19

City
Mount GileadState
OHZip Code
43338FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ACCOUNTANT/EXAMINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

770.00

Date of Receipt

M M	D D	Y Y Y Y
10	26	2018

Transaction ID : SA11AI.209247

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STEWART, KATHLEEN, M., ,

Mailing Address 7326 State Route 19

City
Mount GileadState
OHZip Code
43338FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ACCOUNTANT/EXAMINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

805.00

Date of Receipt

M M	D D	Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209878

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

78.50

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 1182 OF 1411

(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. STEWART, KATHLEEN, M., ,

Mailing Address 7326 State Route 19

 City
 Mount Gilead

 State
 OH

 Zip Code
 43338

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 ACCOUNTANT/EXAMINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.210543

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STEWART, MICHAEL, L., ,

Mailing Address 620 S Boston Street

 City
 Galion

 State
 OH

 Zip Code
 44833

 FEC ID number of contributing
 federal political committee.

 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 ▼

Date of Receipt

 / /

Transaction ID : SA11AI.210544

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STEWART, NEAL, , ,

Mailing Address 1212 Jefferson Street SE

 City
 Olympia

 State
 WA

 Zip Code
 98501

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.207524

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1183 OF 1411

(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. STEWART, NEAL, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.50

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.207726

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STEWART, NEAL, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	26	2018

Transaction ID : SA11AI.207966

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STEWART, PATRICIA, B., ,

Mailing Address 1024 Henry Street

City
ChesterState
ILZip Code
62233FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
PARALEGAL ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

378.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208349

Amount of Each Receipt this Period

42.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

63.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1184 OF 1411

(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. STICKLE, JAMES, R., ,

Mailing Address 507 S Broad Street

City

Knoxville

State

IL

Zip Code

61448

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

CORRECTIONS SERGEANT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208350

Amount of Each Receipt this Period

22.00

☐

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STIDD, TODD, , ,

Mailing Address 8437 9th Way SE

City

Olympia

State

WA

Zip Code

98513

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	14	2018

Transaction ID : SA11AI.207967

Amount of Each Receipt this Period

20.00

☐

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STIGER, GREGORY, S., ,

Mailing Address 3320 Plank Road

City

New Castle

State

PA

Zip Code

16105

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
☐ Other (specify)

General

Aggregate Year-to-Date ▼

824.27

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	08	2018

Transaction ID : SA11AI.207168

Amount of Each Receipt this Period

78.42

☐

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

120.42

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1185 OF 1411

(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. STILWELL, MAZIE, , ,

Mailing Address 4320 NW Second Avenue

City
Des MoinesState
IAZip Code
50313FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.40

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	18	2018

Transaction ID : SA11AI.211878

Amount of Each Receipt this Period

20.84

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STILWELL, MAZIE, , ,

Mailing Address 4320 NW Second Avenue

City
Des MoinesState
IAZip Code
50313FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.24

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	06	2018

Transaction ID : SA11AI.211932

Amount of Each Receipt this Period

20.84

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STINSON, ROGER, A., ,

Mailing Address 1862 Rutland Drive

City
DaytonState
OHZip Code
45406FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.209249

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

51.68

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1186 OF 1411

(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. STINSON, ROGER, A., ,

Mailing Address 1862 Rutland Drive

City
Dayton

State
OH

Zip Code
45406

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209880

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STINSON, ROGER, A., ,

Mailing Address 1862 Rutland Drive

City
Dayton

State
OH

Zip Code
45406

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210545

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STITH, KRISTOPHER, O., ,

Mailing Address 2321 Lincoln Road NE
Apt. 305

City
Washington

State
DC

Zip Code
20002

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
GRAPHIC ARTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

670.00

Date of Receipt

10 / 31 / 2018

Transaction ID : SA11AI.206468

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1187 OF 1411

(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. STITH, KRISTOPHER, O., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 2321 Lincoln Road NE Apt. 305 City Washington State DC Zip Code 20002 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME INT'L Occupation (for Individual) GRAPHIC ARTIST Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 15 / 2018 Transaction ID : SA11AI.206853 Amount of Each Receipt this Period 30.00 ☐ Memo Item
B. STOBART, AMANDA, L., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 47900 State Route 124 City Racine State OH Zip Code 45771 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME OH CN 8 Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 211.64		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 22 / 2018 Transaction ID : SA11AI.210844 Amount of Each Receipt this Period 9.62 ☐ Memo Item
C. STOBART, AMANDA, L., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 47900 State Route 124 City Racine State OH Zip Code 45771 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME OH CN 8 Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 221.26		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 31 / 2018 Transaction ID : SA11AI.210845 Amount of Each Receipt this Period 9.62 ☐ Memo Item
SUBTOTAL of Receipts This Page (optional)..... ▶		49.24
TOTAL This Period (last page this line number only)..... ▶		

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1188 OF 1411

(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. STOBART, AMANDA, L., ,

Mailing Address 47900 State Route 124

City
RacineState
OHZip Code
45771FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.88

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	14	2018

Transaction ID : SA11AI.210949

Amount of Each Receipt this Period

9.62

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STOKES, DIANE, , ,

Mailing Address 7043 West 73rd Place

City
ChicagoState
ILZip Code
60638FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
HUMAN SERVICES CASEWORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208351

Amount of Each Receipt this Period

38.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STORRS, KEITH, GARY, ,

Mailing Address 7702 Effingham Square

City
AlexandriaState
VAZip Code
22315FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
LABOR ECONOMIST III

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1054.64

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206470

Amount of Each Receipt this Period

53.05

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

100.67

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1189 OF 1411

(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 of Individual (Last, First, Middle Initial) or Full Organization Name
STORRS, KEITH, GARY, ,

Mailing Address 7702 Effingham Square

City
AlexandriaState
VAZip Code
22315FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
LABOR ECONOMIST III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1107.69

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		1	5			2	0	1	8		

Transaction ID : SA11AI.206855

Amount of Each Receipt this Period

53.05

☐ Memo Item**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
STOUT, CHUCK, B., ,

Mailing Address 3073 Twin Lakes Drive

City
SpringfieldState
ILZip Code
62707-9312FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

619.65

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	5			2	0	1	8		

Transaction ID : SA11AI.208352

Amount of Each Receipt this Period

53.70

☐ Memo Item**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
STRAUSSER, TRACY, , ,

Mailing Address 217 Driftwood Drive

City
CanonsburgState
PAZip Code
15317FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
FIELD ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

820.09

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			3	1			2	0	1	8		

Transaction ID : SA11AI.206471

Amount of Each Receipt this Period

38.84

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

145.59

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1190 OF 1411

(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. STRAUSSER, TRACY, , ,

Mailing Address 217 Driftwood Drive

City
Canonsburg

State
PA

Zip Code
15317

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

FIELD ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

859.90

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206856

Amount of Each Receipt this Period

39.81

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STRAZICICH, ANDREW, , ,

Mailing Address 41 Maracay

City
San Clemente

State
CA

Zip Code
92672

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME CA LOC 1902

Occupation (for Individual)

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
10 / 19 / 2018

Transaction ID : SA11AI.211072

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STRAZICICH, ANDREW, , ,

Mailing Address 41 Maracay

City
San Clemente

State
CA

Zip Code
92672

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME CA LOC 1902

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211093

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

59.81

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1191 OF 1411

(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. STRAZICICH, ANDREW, , ,

Mailing Address 41 Maracay

City

San Clemente

State

CA

Zip Code

92672

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME CA LOC 1902

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	0			2	0	1	8		

Transaction ID : SA11AI.211114

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STREMSSTERFER, JONATHAN, A., ,Mailing Address 3725 Macomb Street NW
Apt. 206

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)

GRAPHIC ARTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

665.66

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			3	1			2	0	1	8		

Transaction ID : SA11AI.206472

Amount of Each Receipt this Period

33.57

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STREMSSTERFER, JONATHAN, A., ,Mailing Address 3725 Macomb Street NW
Apt. 206

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)

GRAPHIC ARTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

699.23

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			1	5			2	0	1	8		

Transaction ID : SA11AI.206857

Amount of Each Receipt this Period

33.57

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

77.14

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1192 OF 1411

(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. STRICKLAND, KIMBERLY, A., ,

Mailing Address 612 - 2nd Street SE

City
WadenaState
MNZip Code
56482FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MNOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	01	2018

Transaction ID : SA11AI.211778

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STROHM, DEBORAH, L., ,

Mailing Address 5814 Munger Shaw Road

City
SaginawState
MNZip Code
55779FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MNOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	01	2018

Transaction ID : SA11AI.211779

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STROUD, MARVA, J., ,

Mailing Address 1055 5th Street

City
AuroraState
ILZip Code
60505FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
SEC THERAPY AIDE I

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

875.07

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208353

Amount of Each Receipt this Period

83.34

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

123.34

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 1193 OF 1411

(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. STRUNGE, BARBARA, , ,

Mailing Address P.O. Box 1068

City
Anoka

State
MN

Zip Code
55303

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
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
11 / 01 / 2018

Transaction ID : SA11AI.211780

Amount of Each Receipt this Period

24.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STUCKERT, MARY, J., ,

Mailing Address 814 S. Spring Street

City
Bucyrus

State
OH

Zip Code
44820

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ODJFS CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

649.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209250

Amount of Each Receipt this Period

29.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STUCKERT, MARY, J., ,

Mailing Address 814 S. Spring Street

City
Bucyrus

State
OH

Zip Code
44820

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ODJFS CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

678.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209881

Amount of Each Receipt this Period

29.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

83.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 1194 OF 1411

(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. STUCKERT, MARY, J., ,

Mailing Address 814 S. Spring Street

City

Bucyrus

State

OH

Zip Code

44820

FEC ID number of contributing
federal political committee.

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

ODJFS CUSTOMER SERVICES REP

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.210546

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STUCKEY, VALERIE, , ,

Mailing Address 26333 President Avenue

City

Harbor City

State

CA

Zip Code

90710

FEC ID number of contributing
federal political committee.

Name of Employer (for Individual)

AFSCME CA LOC 1902

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.211073

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STUCKEY, VALERIE, , ,

Mailing Address 26333 President Avenue

City

Harbor City

State

CA

Zip Code

90710

FEC ID number of contributing
federal political committee.

Name of Employer (for Individual)

AFSCME CA LOC 1902

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐
☐

Primary

General

Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.211094

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1195 OF 1411

(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. STUCKEY, VALERIE, , ,

Mailing Address 26333 President Avenue

City

Harbor City

State

CA

Zip Code

90710

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME CA LOC 1902

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

11 / 20 / 2018

Transaction ID : SA11AI.211115

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STUEVE, MELISSA, L., ,

Mailing Address 605 North Cleveland Avenue

City

Fergus Falls

State

MN

Zip Code

56537

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 01 / 2018

Transaction ID : SA11AI.211781

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STURDIVANT, ARLENE, , ,

Mailing Address 6113 Kolb Street

City

Fairmont Heights

State

MD

Zip Code

20743

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ADMINISTRATIVE ASSISTANT I

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

780.80

Date of Receipt

10 / 31 / 2018

Transaction ID : SA11AI.206473

Amount of Each Receipt this Period

39.04

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

79.04

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1196 OF 1411

(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. STURDIVANT, ARLENE, , ,

Mailing Address 6113 Kolb Street

City

Fairmont Heights

State

MD

Zip Code

20743

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ADMINISTRATIVE ASSISTANT I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

819.84

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206858

Amount of Each Receipt this Period

39.04

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STYS, AMANDA, K., ,

Mailing Address 2474 S. Kinnickinnic Avenue

City

Milwaukee

State

WI

Zip Code

53207

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

FIELD DATA COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

831.66

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206474

Amount of Each Receipt this Period

38.01

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STYS, AMANDA, K., ,

Mailing Address 2474 S. Kinnickinnic Avenue

City

Milwaukee

State

WI

Zip Code

53207

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

FIELD DATA COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

869.67

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206859

Amount of Each Receipt this Period

38.01

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

115.06

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1197 OF 1411

(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. SUBER, WANDA, M., ,

Mailing Address 805 Broderick Drive

City
Oxon HillState
MDZip Code
20745FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
STAFF ACCOUNTANT III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M	D D	Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206475

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SUBER, WANDA, M., ,

Mailing Address 805 Broderick Drive

City
Oxon HillState
MDZip Code
20745FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
STAFF ACCOUNTANT III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M	D D	Y Y Y Y
11	15	2018

Transaction ID : SA11AI.206860

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SUGIHARA, CHARLENE, N., ,

Mailing Address P.O. Box 5104

City
HiloState
HIZip Code
96720FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI RET CHPT 152Occupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M	D D	Y Y Y Y
11	01	2018

Transaction ID : SA11AI.211049

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

60.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1198 OF 1411

(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. SUKAL, MICHAEL, E., ,

Mailing Address 18033 Mill Creek Drive

City
DerwoodState
MDZip Code
20855FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

DIRECTOR, ORGANIZING & FIELD SV

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1713.80

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2018			

Transaction ID : SA11AI.206476

Amount of Each Receipt this Period

85.69

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SUKAL, MICHAEL, E., ,

Mailing Address 18033 Mill Creek Drive

City
DerwoodState
MDZip Code
20855FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

DIRECTOR, ORGANIZING & FIELD S'

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1799.49

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2018			

Transaction ID : SA11AI.206861

Amount of Each Receipt this Period

85.69

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SULFRIDGE, ANN, M., ,

Mailing Address 1329 Carlisle Avenue

City
DaytonState
OHZip Code
45420FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH CN 8

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

439.52

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			23			2018			

Transaction ID : SA11AI.210846

Amount of Each Receipt this Period

9.62

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

181.00

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 1199 OF 1411

(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. SULFRIDGE, ANN, M., ,

Mailing Address 1329 Carlisle Avenue

City
Dayton

State
OH

Zip Code
45420

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

449.14

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.210847

Amount of Each Receipt this Period

9.62

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SULFRIDGE, ANN, M., ,

Mailing Address 1329 Carlisle Avenue

City
Dayton

State
OH

Zip Code
45420

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.64

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210858

Amount of Each Receipt this Period

11.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SULFRIDGE, ANN, M., ,

Mailing Address 1329 Carlisle Avenue

City
Dayton

State
OH

Zip Code
45420

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

470.26

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 13 / 2018

Transaction ID : SA11AI.210950

Amount of Each Receipt this Period

9.62

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.74

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1200 OF 1411

(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. SULLIVAN, MARY, E., ,

Mailing Address 1880 9th Avenue

City
Watervliet

State
NY

Zip Code
12189

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME NY LOC 1000

Occupation (for Individual)
EXECUTIVE VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1570.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206164

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SULLIVAN, SAMARIA, , ,

Mailing Address 25895 E. 4th Place

City
Aurora

State
CO

Zip Code
80018

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

503.62

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206477

Amount of Each Receipt this Period

25.34

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SULLIVAN, SAMARIA, , ,

Mailing Address 25895 E. 4th Place

City
Aurora

State
CO

Zip Code
80018

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

528.96

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206862

Amount of Each Receipt this Period

25.34

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.68

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1201 OF 1411

(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. SUMMERS, SARA, , ,

Mailing Address 3418 Weyburn Court

City
Columbus

State
OH

Zip Code
43232

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
NETWORK SERVICES TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.32

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209251

Amount of Each Receipt this Period

13.06

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SUMMERS, SARA, , ,

Mailing Address 3418 Weyburn Court

City
Columbus

State
OH

Zip Code
43232

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
NETWORK SERVICES TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.38

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209882

Amount of Each Receipt this Period

13.06

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SUMMERS, SARA, , ,

Mailing Address 3418 Weyburn Court

City
Columbus

State
OH

Zip Code
43232

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
NETWORK SERVICES TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

313.44

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210547

Amount of Each Receipt this Period

13.06

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

39.18

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1202 OF 1411

(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. SUMMERS, STEPHANIE, J., ,

Mailing Address 4031 Executive Park Drive

City
HarrisburgState
PAZip Code
17111FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/NSP/LOCAL 2902Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2018

Transaction ID : SA11AI.207169

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SURBER, RICHARD, J., ,Mailing Address 6449 N Seeley Avenue
Unit B1City
ChicagoState
ILZip Code
60645FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

714.79

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

Transaction ID : SA11AI.208354

Amount of Each Receipt this Period

71.48

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SUTHERLAND, ALICE, M., ,

Mailing Address 534 Gold River Avenue

City
RockfordState
ILZip Code
61102FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
PUBLIC SVC ADMINISTRATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

833.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

Transaction ID : SA11AI.208355

Amount of Each Receipt this Period

83.34

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

174.82

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1203 OF 1411

(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. SUTTON, BRYAN, K., ,

Mailing Address 7481 S 25th Street

City
KalamazooState
MIZip Code
49048FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MI CN 25/LOCAL 1668Occupation (for Individual)
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
10	29	2018

Transaction ID : SA11AI.211371

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SUTTON, BRYAN, K., ,

Mailing Address 7481 S 25th Street

City
KalamazooState
MIZip Code
49048FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MI CN 25/LOCAL 1668Occupation (for Individual)
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
11	07	2018

Transaction ID : SA11AI.211400

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SVEDA, MICHAEL, , ,

Mailing Address 439 Willow Circle

City
AllentownState
PAZip Code
18102FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

912.56

Date of Receipt

M M	D D	Y Y Y Y
11	08	2018

Transaction ID : SA11AI.207170

Amount of Each Receipt this Period

82.96

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

102.96

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1204 OF 1411

(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. SWAN III, GEORGE, M., ,Mailing Address 320 - 7th Street SE
Apt. 104City
MinneapolisState
MNZip Code
55414FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MNOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	01	2018

Transaction ID : SA11AI.211782

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SWANSON, AMANDA, M., ,

Mailing Address P.O. Box 1832

City
LihueState
HIZip Code
96766FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 152Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.40

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	01	2018

Transaction ID : SA11AI.211018

Amount of Each Receipt this Period

20.84

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SWANSON, RITA, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.207727

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

60.84

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1205 OF 1411

(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. SWANSON, RITA, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 26 / 2018

Transaction ID : SA11AI.207968

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SWARO, STEPHANIE, A., ,

Mailing Address 9990 Heimberger Road NW

City
Baltimore

State
OH

Zip Code
43105

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ACCOUNTANT/EXAMINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210548

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SWARTZ, JACK, A., ,

Mailing Address 7394 State Route 97

City
Mansfield

State
OH

Zip Code
44903

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 ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209253

Amount of Each Receipt this Period

10.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

29.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1206 OF 1411

(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. SWARTZ, JACK, A., ,

Mailing Address 7394 State Route 97

City
Mansfield

State
OH

Zip Code
44903

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 ▼

241.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209884

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SWARTZ, JACK, A., ,

Mailing Address 7394 State Route 97

City
Mansfield

State
OH

Zip Code
44903

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 ▼

252.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210549

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SWIHART, ADAM, , ,

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 (for Individual)
AFSCME IA CN 61

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

308.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2018

Transaction ID : SA11AI.211879

Amount of Each Receipt this Period

30.82

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

51.82

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1207 OF 1411

(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. SWIHART, ADAM, , ,

Mailing Address 4320 NW Second Avenue

City
Des MoinesState
IAZip Code
50313FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2018

Transaction ID : SA11AI.211933

Amount of Each Receipt this Period

30.82

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SZAKAL, MICHELLE, M., ,

Mailing Address 102 Squires Court

City
South AmherstState
OHZip Code
44001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.209885

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SZAKAL, MICHELLE, M., ,

Mailing Address 102 Squires Court

City
South AmherstState
OHZip Code
44001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210550

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

48.82

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1208 OF 1411

(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. TACORONTE, FRANK, E., ,

Mailing Address 1564 Nicely Road

City
Blanchester

State
OH

Zip Code
45107

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HIGHWAY TECHNICIAN III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209255

Amount of Each Receipt this Period

11.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TACORONTE, FRANK, E., ,

Mailing Address 1564 Nicely Road

City
Blanchester

State
OH

Zip Code
45107

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HIGHWAY TECHNICIAN III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209886

Amount of Each Receipt this Period

11.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TACORONTE, FRANK, E., ,

Mailing Address 1564 Nicely Road

City
Blanchester

State
OH

Zip Code
45107

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HIGHWAY TECHNICIAN III

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

276.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210551

Amount of Each Receipt this Period

11.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

34.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1209 OF 1411

(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. TALBERT, MICHAELE, D ., ,

Mailing Address 22945 Farmersville Road

City
Girard

State
IL

Zip Code
62640

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

INFORMATION SYSTEMS TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.50

Date of Receipt

11 / 05 / 2018

Transaction ID : SA11AI.208356

Amount of Each Receipt this Period

31.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TANIMOJO, EMMANUEL, D., ,

Mailing Address 805 Moonlight Place

City
Woodbury

State
MN

Zip Code
55125

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 01 / 2018

Transaction ID : SA11AI.211783

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TANIMOTO, DEAN, , ,

Mailing Address 1374 Mailani Street

City
Hilo

State
HI

Zip Code
96720

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME HI LOC 152

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 01 / 2018

Transaction ID : SA11AI.211019

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

81.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1210 OF 1411

(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. TARLETON, VERONICA, M., ,

Mailing Address 1374 Mailani Street

City
Hilo

State
HI

Zip Code
96720

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 152

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211020

Amount of Each Receipt this Period

20.85

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TARTT, MICHELE, M., ,

Mailing Address 8116 Cherry Laurel Street

City
Blacklick

State
OH

Zip Code
43004

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
UNEMPLOYMENT COMPENS REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210552

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TASHIRO, ANNETTE, C., ,

Mailing Address 45-455 Nukoli Place

City
Kaneohe

State
HI

Zip Code
96744

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI RET CHPT 152

Occupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211050

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

49.35

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1211 OF 1411

(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. TAYLOR, AL, M., ,

Mailing Address 14920 E Riverside Drive

City
Harvey

State
IL

Zip Code
60426

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
CORRECTIONS SERGEANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208357

Amount of Each Receipt this Period

41.66

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TAYLOR, DANIEL, E., ,

Mailing Address 3971 Hoover Road
PMB 143

City
Grove City

State
OH

Zip Code
43123

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 ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209257

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TAYLOR, DANIEL, E., ,

Mailing Address 3971 Hoover Road
PMB 143

City
Grove City

State
OH

Zip Code
43123

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 ▼

241.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209888

Amount of Each Receipt this Period

10.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

62.66

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1212 OF 1411

(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. TAYLOR, DANIEL, E., ,Mailing Address 3971 Hoover Road
PMB 143City
Grove CityState
OHZip Code
43123FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210553

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TAYLOR, JANEEN, D., ,

Mailing Address 1428 Hartford Avenue

City
AkronState
OHZip Code
44320FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

465.61

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2018

Transaction ID : SA11AI.210951

Amount of Each Receipt this Period

43.44

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TAYLOR, PATRICIA, S., ,

Mailing Address 954 Gard Avenue

City
DaytonState
OHZip Code
45417FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2018

Transaction ID : SA11AI.209258

Amount of Each Receipt this Period

14.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

68.44

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1213 OF 1411

(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. TAYLOR, PATRICIA, S., ,

Mailing Address 954 Gard Avenue

City
Dayton

State
OH

Zip Code
45417

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 ▼

333.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209889

Amount of Each Receipt this Period

14.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TAYLOR, PATRICIA, S., ,

Mailing Address 954 Gard Avenue

City
Dayton

State
OH

Zip Code
45417

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 ▼

348.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210554

Amount of Each Receipt this Period

14.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TAYLOR, TODD, , ,

Mailing Address P.O. Box 9457

City
Cedar Rapids

State
IA

Zip Code
52409

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2018

Transaction ID : SA11AI.211880

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

69.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1214 OF 1411

(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. TAYLOR, TODD, , ,

Mailing Address P.O. Box 9457

City
Cedar RapidsState
IAZip Code
52409FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	06	2018

Transaction ID : SA11AI.211934

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TAYLOR-SPARKS, JEREMY, , ,

Mailing Address 7555 14th Avenue NE

City
OlympiaState
WAZip Code
98516FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	26	2018

Transaction ID : SA11AI.207969

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TEHRANI, MOHAMMED, , ,

Mailing Address 22110 Castleton Court

City
BoysState
MDZip Code
20841FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
ASSISTANT DIRECTOR, NETWORK O

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1218.89

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206479

Amount of Each Receipt this Period

59.41

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

109.41

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
Detailed Summary Page

FOR LINE NUMBER: PAGE 1215 OF 1411

(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. TEHRANI, MOHAMMED, , ,

Mailing Address 22110 Castleton Court

City
Boyd

State
MD

Zip Code
20841

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ASSISTANT DIRECTOR, NETWORK C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1278.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206864

Amount of Each Receipt this Period

59.41

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TENNEY, MICHAEL, S., ,

Mailing Address 1963 Flemings Falls Road

City

Mansfield

State

OH

Zip Code

44903

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 ▼

480.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210555

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TENNORT-FULLIO, DOROTHY, F., ,

Mailing Address P.O. Box 248

City

Zion

State

IL

Zip Code

60099

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

MENTAL HEALTH TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

218.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208358

Amount of Each Receipt this Period

31.26

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

130.67

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 1216 OF 1411

(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. TERRY, ANGANETTA, D., ,

Mailing Address 129 N Blanche Street

 City
 Mounds

 State
 IL

 Zip Code
 62964

 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 PROTECTION COORD.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

 208.40

Date of Receipt

 M M / D D / Y Y Y Y
 11 / 05 / 2018

Transaction ID : SA11AI.208359

Amount of Each Receipt this Period

 20.84
☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TERRY, JACQUELINE, , ,

 Mailing Address 1281 Hazelwood Street
 # 103

 City
 Saint Paul

 State
 MN

 Zip Code
 55106

 FEC ID number of contributing
 federal political committee.

 C

 Name of Employer (for Individual)
 AFSCME MN CN 5/STATE OF MN

 Occupation (for Individual)
 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
 11 / 01 / 2018

Transaction ID : SA11AI.211784

Amount of Each Receipt this Period

 40.00
☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TERRY, LATOYNUA, R., ,

Mailing Address 304 S McKinley Street

 City
 Mounds

 State
 IL

 Zip Code
 62964

 FEC ID number of contributing
 federal political committee.

 C

 Name of Employer (for Individual)
 AFSCME IL CN 31/STATE OF IL

 Occupation (for Individual)
 OFFICE ASSOCIATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

 218.82

Date of Receipt

 M M / D D / Y Y Y Y
 11 / 05 / 2018

Transaction ID : SA11AI.208360

Amount of Each Receipt this Period

 31.26
☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

 92.10
TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1217 OF 1411

(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. TESSNESS, DYLAN, R., ,

Mailing Address 1220 5th Avenue NE

City
BrainerdState
MNZip Code
56401FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MNOccupation (for Individual)
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
11			01			2018			

Transaction ID : SA11AI.211785

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TEWFIK, OMAR, , ,Mailing Address 1433 T Street NW
#210City
WashingtonState
DCZip Code
20009FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
MEDIA RELATIONS SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

832.14

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2018			

Transaction ID : SA11AI.206480

Amount of Each Receipt this Period

41.97

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TEWFIK, OMAR, , ,Mailing Address 1433 T Street NW
#210City
WashingtonState
DCZip Code
20009FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
MEDIA RELATIONS SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

874.11

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2018			

Transaction ID : SA11AI.206865

Amount of Each Receipt this Period

41.97

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

103.94

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 1218 OF 1411

(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. THARP, TIMOTHY, R., ,

Mailing Address 1016 Garrison Street NE

 City
 Olympia

 State
 WA

 Zip Code
 98506

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME WA CN 28

 Occupation (for Individual)
 ORGANIZING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.207970

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. THEAL, DIANNE, L., ,

Mailing Address 2515 Derry Street

 City
 Harrisburg

 State
 PA

 Zip Code
 17111

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME PA CN 13/STATE OF PA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.207171

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. THEIS, COLIN, M., ,

 Mailing Address 2406 W Farragut Avenue
 #3B

 City
 Chicago

 State
 IL

 Zip Code
 60625

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME IL CN 31

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.208361

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1219 OF 1411

(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. THEOBALD, DAVID, S., ,

Mailing Address 8007 Beavers Ridge Road

City
Piketon

State
OH

Zip Code
45661

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209259

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. THEOBALD, DAVID, S., ,

Mailing Address 8007 Beavers Ridge Road

City
Piketon

State
OH

Zip Code
45661

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 ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209890

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. THEOBALD, DAVID, S., ,

Mailing Address 8007 Beavers Ridge Road

City
Piketon

State
OH

Zip Code
45661

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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210556

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 1220 OF 1411

(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. THIEL, CHAD, , ,			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>26</td> <td></td> <td>2018</td> </tr> </table>			M M M	/	D D D	/	Y Y Y Y Y Y	10		26		2018
M M M	/	D D D	/	Y Y Y Y Y Y											
10		26		2018											
Mailing Address 115 Park Avenue			Transaction ID : SA11AI.209260												
City London	State OH	Zip Code 43140	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">14.50</td> </tr> </table>			14.50									
14.50															
FEC ID number of contributing federal political committee. <table border="1"> <tr> <td>C</td> <td colspan="5"></td> </tr> </table>			C						☐ Memo Item						
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 ▼ <table border="1"> <tr> <td colspan="5">319.00</td> </tr> </table>				319.00									
319.00															
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. THIEL, CHAD, , ,			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>09</td> <td></td> <td>2018</td> </tr> </table>			M M M	/	D D D	/	Y Y Y Y Y Y	11		09		2018
M M M	/	D D D	/	Y Y Y Y Y Y											
11		09		2018											
Mailing Address 115 Park Avenue			Transaction ID : SA11AI.209891												
City London	State OH	Zip Code 43140	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">14.50</td> </tr> </table>			14.50									
14.50															
FEC ID number of contributing federal political committee. <table border="1"> <tr> <td>C</td> <td colspan="5"></td> </tr> </table>			C						☐ Memo Item						
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 ▼ <table border="1"> <tr> <td colspan="5">333.50</td> </tr> </table>				333.50									
333.50															
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. THIEL, CHAD, , ,			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>23</td> <td></td> <td>2018</td> </tr> </table>			M M M	/	D D D	/	Y Y Y Y Y Y	11		23		2018
M M M	/	D D D	/	Y Y Y Y Y Y											
11		23		2018											
Mailing Address 115 Park Avenue			Transaction ID : SA11AI.210557												
City London	State OH	Zip Code 43140	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">14.50</td> </tr> </table>			14.50									
14.50															
FEC ID number of contributing federal political committee. <table border="1"> <tr> <td>C</td> <td colspan="5"></td> </tr> </table>			C						☐ Memo Item						
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 ▼ <table border="1"> <tr> <td colspan="5">348.00</td> </tr> </table>				348.00									
348.00															
SUBTOTAL of Receipts This Page (optional).....			<table border="1"> <tr> <td colspan="5">43.50</td> </tr> </table>			43.50									
43.50															
TOTAL This Period (last page this line number only).....			<table border="1"> <tr> <td colspan="5"></td> </tr> </table>												

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1221 OF 1411

(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. THIES, MARY, , ,

Mailing Address 7559 Dawn Avenue

City

Inver Grove

State

MN

Zip Code

55076

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211786

Amount of Each Receipt this Period

28.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. THOMAS, JOHN, , ,

Mailing Address 1034 N Washington Avenue

City

Lansing

State

MI

Zip Code

48906

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MI CN 25

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

635.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211349

Amount of Each Receipt this Period

30.70

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. THOMAS, JOHN, , ,

Mailing Address 1034 N Washington Avenue

City

Lansing

State

MI

Zip Code

48906

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MI CN 25

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

666.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 20 / 2018

Transaction ID : SA11AI.211401

Amount of Each Receipt this Period

30.70

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

89.40

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1222 OF 1411

(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. THOMAS, MATTHEW, , ,

Mailing Address 236 N Abington Road

City
Clarks GreenState
PAZip Code
18411FEC 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 ▼

478.91

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			08			2018			

Transaction ID : SA11AI.207172

Amount of Each Receipt this Period

44.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. THOMAS, THEARESA, C ., ,

Mailing Address 130 Evergreen Terrace

City
ColumbusState
OHZip Code
43228FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
FINANCIAL ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2018			

Transaction ID : SA11AI.209261

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. THOMAS, THEARESA, C ., ,

Mailing Address 130 Evergreen Terrace

City
ColumbusState
OHZip Code
43228FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
FINANCIAL ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			09			2018			

Transaction ID : SA11AI.209892

Amount of Each Receipt this Period

12.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

68.20

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1223 OF 1411

(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. THOMAS, THEARESA, C ., ,

Mailing Address 130 Evergreen Terrace

City
ColumbusState
OHZip Code
43228FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
FINANCIAL ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210558

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. THOMASSON, PATRICK, S., ,

Mailing Address 1347 Marot Drive

City
TrotwoodState
OHZip Code
45427FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8Occupation (for Individual)
LEAD STAFF ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

758.42

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	06	2018

Transaction ID : SA11AI.210952

Amount of Each Receipt this Period

69.26

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. THOMPSON, AYANA, N., ,

Mailing Address 16781 Chagrin Blvd.

City
Shaker HeightsState
OHZip Code
44120FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
THERAPUTIC PROGRAM TECHNICIAI

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209893

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.26

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1224 OF 1411

(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. THOMPSON, AYANA, N., ,

Mailing Address 16781 Chagrin Blvd.

City

Shaker Heights

State

OH

Zip Code

44120

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210559

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. THOMPSON, BRUCE, E., ,

Mailing Address 531 Tanya Avenue NW

City

Massillon

State

OH

Zip Code

44646

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

JUVENILE CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

628.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210560

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. THOMPSON, DEIDRE, R., ,

Mailing Address 1614 5th Avenue

City

Joliet

State

IL

Zip Code

60433

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

LPN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

208.40

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208362

Amount of Each Receipt this Period

31.26

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.26

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1225 OF 1411

(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. THOMPSON, JARED, L., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 4362 E Michael Lane City Olney State IL Zip Code 62450 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 PROTECTION ADVISOR Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 875.07			Date of Receipt M M / D D / Y Y Y Y Y 11 / 05 / 2018 Transaction ID : SA11AI.208363 Amount of Each Receipt this Period 83.34 ☐ Memo Item
B. THOMPSON, KATHLEEN, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 1212 Jefferson Street SE City Olympia State WA Zip Code 98501 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA Occupation (for Individual) 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 11 / 09 / 2018 Transaction ID : SA11AI.207729 Amount of Each Receipt this Period 10.00 ☐ Memo Item
C. THOMPSON, KATHLEEN, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 1212 Jefferson Street SE City Olympia State WA Zip Code 98501 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA Occupation (for Individual) 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 11 / 26 / 2018 Transaction ID : SA11AI.207971 Amount of Each Receipt this Period 10.00 ☐ Memo Item
SUBTOTAL of Receipts This Page (optional)..... ▶			103.34
TOTAL This Period (last page this line number only)..... ▶			

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1226 OF 1411

(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. THOMPSON, LAWRANCE, W., ,Mailing Address 3662 Bridgeport Way W.
Apt. D1City
University PlaceState
WAZip Code
98466FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
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
10			25			2018			

Transaction ID : SA11AI.207730

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. THOMPSON, LAWRANCE, W., ,Mailing Address 3662 Bridgeport Way W.
Apt. D1City
University PlaceState
WAZip Code
98466FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
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
11			09			2018			

Transaction ID : SA11AI.207972

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. THOMPSON, RENO, , ,

Mailing Address 1034 N. Washington Avenue

City
LansingState
MIZip Code
48906FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MI CN 25Occupation (for Individual)
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
11			07			2018			

Transaction ID : SA11AI.211350

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

40.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1227 OF 1411

(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. THOMPSON, RENO, , ,

Mailing Address 1034 N. Washington Avenue

City
LansingState
MIZip Code
48906FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MI CN 25Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	20	/	2018

Transaction ID : SA11AI.211402

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. THOMPSON, ROBERT, L., ,

Mailing Address 927 Gibbs Avenue NE

City
CantonState
OHZip Code
44705-1074FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L/STATE STREETOccupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.01

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2018

Transaction ID : SA11AI.206867

Amount of Each Receipt this Period

49.19

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. THOMPSON, RUTH, , ,Mailing Address 4400 Park Avenue
Apt. 13City
Des MoinesState
IAZip Code
50321FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/STATE OF IAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2018

Transaction ID : SA11AI.211861

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

69.19

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1228 OF 1411

(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. THOMPSON, RUTH, , ,Mailing Address 4400 Park Avenue
Apt. 13City
Des MoinesState
IAZip Code
50321FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/STATE OF IAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.211935

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. THORNTON, DALIA, RIZK, ,

Mailing Address 13210 Foxhall Drive

City
Silver SpringState
MDZip Code
20906FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
ASSISTANT DIRECTOR, RESEARCH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1179.44

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206482

Amount of Each Receipt this Period

51.90

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. THORNTON, DALIA, RIZK, ,

Mailing Address 13210 Foxhall Drive

City
Silver SpringState
MDZip Code
20906FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
ASSISTANT DIRECTOR, RESEARCH

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1231.34

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	15	2018

Transaction ID : SA11AI.206868

Amount of Each Receipt this Period

51.90

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

113.80

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 1229 OF 1411

(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. THORNTON, HELEN, , ,

Mailing Address 500 N. Elmwood

City
Oak Park

State
IL

Zip Code
60302

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

942.02

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208364

Amount of Each Receipt this Period

94.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. THORNTON, JAMES, A., , SR.

Mailing Address 231 Allison Road

City
Dixonville

State
PA

Zip Code
15734

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)
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
10 / 31 / 2018

Transaction ID : SA11AI.207173

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TILGNER, LESLIE, , ,

Mailing Address 107 Naomi Avenue

City
Pismo Beach

State
CA

Zip Code
93449

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 3930

Occupation (for Individual)
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
11 / 07 / 2018

Transaction ID : SA11AI.211165

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

134.20

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1230 OF 1411

(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. TILTON, EDWARD, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2018			

Transaction ID : SA11AI.207973

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TILTON, LESLIE, A., ,Mailing Address 6361 Proprietors Road
Apt. B6City
WorthingtonState
OHZip Code
43085FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTIONAL RECORDS CLERK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

407.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2018			

Transaction ID : SA11AI.209263

Amount of Each Receipt this Period

18.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TILTON, LESLIE, A., ,Mailing Address 6361 Proprietors Road
Apt. B6City
WorthingtonState
OHZip Code
43085FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTIONAL RECORDS CLERK

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			09			2018			

Transaction ID : SA11AI.209894

Amount of Each Receipt this Period

18.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

57.00

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 1231 OF 1411

(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. TILTON, LESLIE, A., ,
 Mailing Address 6361 Proprietors Road
 Apt. B6

 City
 Worthington

 State
 OH

 Zip Code
 43085

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 CORRECTIONAL RECORDS CLERK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210561

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TIMMONS, EDWARD, , ,

Mailing Address 8515 Lyra Drive

 City
 Columbus

 State
 OH

 Zip Code
 43240

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH CN 8

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2018

Transaction ID : SA11AI.210953

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TINNEY, PHILIP, F., ,

Mailing Address 529 Ramona

 City
 Modesto

 State
 CA

 Zip Code
 95350

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME CA CN 57

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2018

Transaction ID : SA11AI.211219

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1232 OF 1411

(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. TINNEY, PHILIP, F., ,

Mailing Address 529 Ramona

City
Modesto

State
CA

Zip Code
95350

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA CN 57

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.211220

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TINNEY, PHILIP, F., ,

Mailing Address 529 Ramona

City
Modesto

State
CA

Zip Code
95350

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA CN 57

Occupation (for Individual)
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 Y
11 / 23 / 2018

Transaction ID : SA11AI.211249

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TIRADO, ARACELY, , ,

Mailing Address 3432 W Marquette Road

City
Chicago

State
IL

Zip Code
60629

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
OFFICE CLERK

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

437.43

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208365

Amount of Each Receipt this Period

41.66

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

71.66

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1233 OF 1411

(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. TIRU, LUZ, D., ,

Mailing Address 416 Reynolds Avenue

City
Lancaster

State
PA

Zip Code
17602

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/NSP/LOCAL 1758

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207174

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TOLAR, JONATHAN, , ,

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 ▼

603.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207175

Amount of Each Receipt this Period

54.84

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TOLE, ADDLEY, , ,

Mailing Address 41628 Mountain View Place E

City
Gold Bar

State
WA

Zip Code
98251

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 14 / 2018

Transaction ID : SA11AI.207974

Amount of Each Receipt this Period

21.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

95.84

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1234 OF 1411

(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. TOLLEFSON, TERRY, D., ,

Mailing Address 21188 270th Street SW

City
Crookston

State
MN

Zip Code
56716

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211789

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TOMKINS, JESSICA, , ,

Mailing Address 2538 S Sheridan Avenue

City
Tacoma

State
WA

Zip Code
98405

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 09 / 2018

Transaction ID : SA11AI.207731

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TOMKINS, JESSICA, , ,

Mailing Address 2538 S Sheridan Avenue

City
Tacoma

State
WA

Zip Code
98405

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 26 / 2018

Transaction ID : SA11AI.207975

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

80.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1235 OF 1411

(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. TOMPKINS, TINA, M., ,

Mailing Address 5554 Wind Drift Drive

City
Powell

State
OH

Zip Code
43065

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
DISABILITY CLAIMS ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210562

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TONEY, MYRNA, M., ,

Mailing Address P.O. Box 224

City
Richland Ctr

State
WI

Zip Code
53581

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WI CN 32

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.64

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2018

Transaction ID : SA11AI.211452

Amount of Each Receipt this Period

19.72

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TOPETE, GUADALUPE, , ,

Mailing Address 173 W Seaward Avenue
Apt. 4

City
San Ysidro

State
CA

Zip Code
92173

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 3930

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211166

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

58.22

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1236 OF 1411

(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. TORGERUD, THOMAS, , ,

Mailing Address 112 Harriet Street N.

City
Stillwater

State
MN

Zip Code
55082

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
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
11 / 01 / 2018

Transaction ID : SA11AI.211790

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TORGESON, AMY, , ,

Mailing Address 2119 5th Street S.

City

South St. Paul

State
MN

Zip Code
55075

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

513.92

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211791

Amount of Each Receipt this Period

64.24

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TORRECILLAS, CARMEN, , ,

Mailing Address 748 Dailey Avenue

City

San Jose

State
CA

Zip Code
95123

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA CN 57

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

200.40

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2018

Transaction ID : SA11AI.211250

Amount of Each Receipt this Period

8.35

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

92.59

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1237 OF 1411

(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. TORREGROSA, HECTOR, L., ,

Mailing Address 2072 Farrington Road

City
Springfield

State
IL

Zip Code
62702

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
DISABILITY APPEALS OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208366

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TORRES, LYNDIA, S., ,

Mailing Address 900 King Russ Road

City
Harrisburg

State
PA

Zip Code
17109

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.207176

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TORRES-MOYER, NAHACI, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 09 / 2018

Transaction ID : SA11AI.207732

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

52.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1238 OF 1411

(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. **TORRES-MOYER, NAHACI, , ,**

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207976

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **TOSTI, TOM, , ,**

Mailing Address 327 Lincoln Avenue

City
BristolState
PAZip Code
19007FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207177

Amount of Each Receipt this Period

125.24

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **TOWNSEND, ALEXANDRA, , ,**Mailing Address 700 Lyon
Apt. BCity
ColumbiaState
MOZip Code
65201FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
POLITICAL ACTION REP I

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

664.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206484

Amount of Each Receipt this Period

33.63

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

168.87

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1239 OF 1411

(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. TOWNSEND, ALEXANDRA, , ,

Mailing Address 700 Lyon

Apt. B

City
ColumbiaState
MOZip Code
65201FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

POLITICAL ACTION REP I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2018

Transaction ID : SA11AI.206870

Amount of Each Receipt this Period

33.63

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TOWNSEND, DOROTHY, L., ,

Mailing Address 849 Cormac Drive

City
RiverdaleState
GAZip Code
30296FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1697.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2018

Transaction ID : SA11AI.206485

Amount of Each Receipt this Period

80.35

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TOWNSEND, DOROTHY, L., ,

Mailing Address 849 Cormac Drive

City
RiverdaleState
GAZip Code
30296FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1777.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2018

Transaction ID : SA11AI.206871

Amount of Each Receipt this Period

80.35

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

194.33

TOTAL This Period (last page this line number only)..... ►

X	11a		11b		11c		12		
	13		14		15		16		17

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

FEC Schedule A (Form 3X) Rev. 06/2016

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1241 OF 1411

(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. TRAPP, TIMOTHY, J., ,

Mailing Address 3816 Elljay Drive

City
Cincinnati

State
OH

Zip Code
45241

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 ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210563

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TRASK, MAHIE, P., ,

Mailing Address 1374 Mailani Street

City
Hilo

State
HI

Zip Code
96720

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 152

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

503.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211021

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TREAS, VON, , ,

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 ▼

1048.62

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207179

Amount of Each Receipt this Period

78.42

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

106.92

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1242 OF 1411

(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. **TRUONG, STEVEN, , ,**

Mailing Address 3231C Business Park Drive
#318

City State Zip Code
Vista CA 92081

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 3930

Occupation (for Individual)
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
11 / 07 / 2018

Transaction ID : SA11AI.211167

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **TSO, JOSEPH, , ,**

Mailing Address 2000 S Eads Street
Apt. 114

City State Zip Code
Arlington VA 22202

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ASSISTANT STRATEGIC ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.87

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206487

Amount of Each Receipt this Period

31.01

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **TSO, JOSEPH, , ,**

Mailing Address 2000 S Eads Street
Apt. 114

City State Zip Code
Arlington VA 22202

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ASSISTANT STRATEGIC ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

636.88

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206873

Amount of Each Receipt this Period

31.01

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

82.02

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 1243 OF 1411

(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. TSUNEISHI, LANI, E., ,

Mailing Address 6847 Niumalu Loop

 City
 Honolulu

 State
 HI

 Zip Code
 96825

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME HI LOC 152

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2018

Transaction ID : SA11AI.211022

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TUCK-COOK, DELORES, , ,

Mailing Address 1705 Cordell Avenue

 City
 Columbus

 State
 OH

 Zip Code
 43219

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 FINANCIAL ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.209897

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TUCK-COOK, DELORES, , ,

Mailing Address 1705 Cordell Avenue

 City
 Columbus

 State
 OH

 Zip Code
 43219

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 FINANCIAL ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210564

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1244 OF 1411

(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. TUCKER, CORA, , ,

Mailing Address 4855 Seminole Drive

City
San Diego

State
CA

Zip Code
92115

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 3930

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211168

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TUCKER, GARY, D., ,

Mailing Address 647 State Highway 267

City
Murrayville

State
IL

Zip Code
62668

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
PUBLIC SVC ADMINISTRATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208367

Amount of Each Receipt this Period

31.26

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TUCKER, JOHN, , ,

Mailing Address 1150 N First Street
101

City
San Jose

State
CA

Zip Code
95122

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA CN 57

Occupation (for Individual)
BUSINESS AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 24 / 2018

Transaction ID : SA11AI.211251

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

71.26

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1245 OF 1411

(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. TUDOR, JAMES, H., ,

Mailing Address 933 South Avenue

City
Saint Charles

State
IL

Zip Code
60174

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

EMPLOYMENT SECURITY OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.40

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208368

Amount of Each Receipt this Period

31.26

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TUNGATE, WILLIAM, J., ,

Mailing Address 2110 Shamrock Arbor Drive

City
Salem

State
OH

Zip Code
44460

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 ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209898

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TUNGATE, WILLIAM, J., ,

Mailing Address 2110 Shamrock Arbor Drive

City
Salem

State
OH

Zip Code
44460

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 ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210565

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

49.26

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1246 OF 1411

(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. TURNER, COREY, C., ,

Mailing Address 1906 W 27th Street

City
LorainState
OHZip Code
44052FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M	D D	Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209899

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TURNER, COREY, C., ,

Mailing Address 1906 W 27th Street

City
LorainState
OHZip Code
44052FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M	D D	Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210566

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TWAROG, MICHAEL, M., ,

Mailing Address 5652 Walnut Avenue

City
Downers GroveState
ILZip Code
60516FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
JUVENILE JUSTICE SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M	D D	Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208369

Amount of Each Receipt this Period

21.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

39.00

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 1247 OF 1411

(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. TWIFORD, JOHN, , , 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 ▼ 754.38			Date of Receipt M M / D D / Y Y Y Y Y 11 / 08 / 2018 Transaction ID : SA11AI.207180 Amount of Each Receipt this Period 68.58 ☐ Memo Item		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. TYLER, KAREN, J., , Mailing Address 15 Milmarson Place NW City Washington State DC Zip Code 20011 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME INT'L Occupation (for Individual) ASSOCIATE DIRECTOR, AUDITING Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 1334.20			Date of Receipt M M / D D / Y Y Y Y Y 10 / 31 / 2018 Transaction ID : SA11AI.206488 Amount of Each Receipt this Period 62.71 ☐ Memo Item		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. TYLER, KAREN, J., , Mailing Address 15 Milmarson Place NW City Washington State DC Zip Code 20011 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME INT'L Occupation (for Individual) ASSOCIATE DIRECTOR, AUDITING Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 1396.91			Date of Receipt M M / D D / Y Y Y Y Y 11 / 15 / 2018 Transaction ID : SA11AI.206874 Amount of Each Receipt this Period 62.71 ☐ Memo Item		
SUBTOTAL of Receipts This Page (optional)..... ▶			194.00		
TOTAL This Period (last page this line number only)..... ▶					

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1248 OF 1411

(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. TYLER, SALLY, , ,

Mailing Address 1033 Lamont Street NW

City
WashingtonState
DCZip Code
20010FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
PUBLIC POLICY ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1088.84

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206489

Amount of Each Receipt this Period

57.43

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TYLER, SALLY, , ,

Mailing Address 1033 Lamont Street NW

City
WashingtonState
DCZip Code
20010FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
PUBLIC POLICY ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1146.27

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	15	2018

Transaction ID : SA11AI.206875

Amount of Each Receipt this Period

57.43

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. UGURU, CHRISTINE, A., ,

Mailing Address 6374 Dummerston Court

City
DublinState
OHZip Code
43017FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
INFORMATION TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.209269

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

127.86

TOTAL This Period (last page this line number only).....▶

X	11a		11b		11c		12		
	13		14		15		16		17

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

FEC Schedule A (Form 3X) Rev. 06/2016

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1250 OF 1411

(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. URIBE, JOSE, , ,

Mailing Address 1707 Lindig Street
Apt. 7

City
St. Paul

State
MN

Zip Code
55113

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

557.14

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206492

Amount of Each Receipt this Period

28.73

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. URIBE, JOSE, , ,

Mailing Address 1707 Lindig Street
Apt. 7

City
St. Paul

State
MN

Zip Code
55113

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.87

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206878

Amount of Each Receipt this Period

28.73

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. UWEKOOLANI, BARBARA, S., ,

Mailing Address 888 Mililani Street
Suite 601

City
Honolulu

State
HI

Zip Code
96813-2991

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI RET CHPT 152

Occupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211051

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

82.46

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1251 OF 1411

(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. VACHON, VANESSA, , ,

Mailing Address 1140 E Street
#26

City
Eureka

State
CA

Zip Code
95501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA CN 57

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 24 / 2018

Transaction ID : SA11AI.211252

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VALDEZ, ELENA, , ,

Mailing Address 3600 Benton Street
#10

City

Santa Clara

State
CA

Zip Code
95051

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA CN 57

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211253

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VALENTINE, ADAM, , ,

Mailing Address 1226 W Main Street

City

Ashland

State
OH

Zip Code
44805

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 ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210568

Amount of Each Receipt this Period

8.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

58.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1252 OF 1411

(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. VALENTINE, BENJAMIN, M., ,

Mailing Address 1344 Meadow Lane

City
AshlandState
OHZip Code
44805FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.209271

Amount of Each Receipt this Period

14.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VALENTINE, BENJAMIN, M., ,

Mailing Address 1344 Meadow Lane

City
AshlandState
OHZip Code
44805FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.50

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209902

Amount of Each Receipt this Period

14.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VALENTINE, BENJAMIN, M., ,

Mailing Address 1344 Meadow Lane

City
AshlandState
OHZip Code
44805FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210569

Amount of Each Receipt this Period

14.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

43.50

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 1253 OF 1411

(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. VANBIBBER, CARL, E., ,

Mailing Address 1935 Tanglewood Drive S

City
Ontario

State
OH

Zip Code
44906

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 SERGEANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209272

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VANBIBBER, CARL, E., ,

Mailing Address 1935 Tanglewood Drive S

City
Ontario

State
OH

Zip Code
44906

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 SERGEANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209903

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VANBIBBER, CARL, E., ,

Mailing Address 1935 Tanglewood Drive S

City
Ontario

State
OH

Zip Code
44906

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 SERGEANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210570

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 1254 OF 1411

(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. VANBUSKIRK, JOHN, M., ,

Mailing Address 430 Rose Marie Lane

City

East Stroudsburg

State

PA

Zip Code

18302

FEC ID number of contributing
federal political committee.

Name of Employer (for Individual)

AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.207181

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VANDERWALKER, MARY, J., ,
Mailing Address 8700 Pershing Drive
#3215

City

Playa del Rey

State

CA

Zip Code

90293

FEC ID number of contributing
federal political committee.

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

FIELD ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.206494

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VANDERWALKER, MARY, J., ,
Mailing Address 8700 Pershing Drive
#3215

City

Playa del Rey

State

CA

Zip Code

90293

FEC ID number of contributing
federal political committee.

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

FIELD ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.206880

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1255 OF 1411

(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. VANHORN, BEN, O., ,

Mailing Address 3577 N Thayer Road

City
Lima

State
OH

Zip Code
45801

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 ▼

207.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209904

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VANHORN, BEN, O., ,

Mailing Address 3577 N Thayer Road

City
Lima

State
OH

Zip Code
45801

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 ▼

216.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210571

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VAN HORSEN, SHERI, S., ,

Mailing Address 3900 E. Sunset Road
#2117

City
Las Vegas

State
NV

Zip Code
89120

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
INT'L UNION REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1040.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206493

Amount of Each Receipt this Period

49.77

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

67.77

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1256 OF 1411

(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. VAN HORSEN, SHERI, S., ,

Mailing Address 3900 E. Sunset Road
#2117

City
Las Vegas

State
NV

Zip Code
89120

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
INT'L UNION REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1090.29

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206879

Amount of Each Receipt this Period

49.89

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VANIER, KATHRYN, , ,

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 ▼

579.48

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207182

Amount of Each Receipt this Period

52.68

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VARGA, NORA, , ,

Mailing Address 797 Josephine Avenue

City
Columbus

State
OH

Zip Code
43204

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
CUSTOMER SERVICE REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210572

Amount of Each Receipt this Period

8.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

111.07

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 1257 OF 1411

(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. VAUK, PAT, A., ,

Mailing Address 3209 47th Avenue S

City
Minneapolis

State
MN

Zip Code
55406

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
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
11 / 01 / 2018

Transaction ID : SA11AI.211792

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VENDELA, GARY, S., ,

Mailing Address 6344 S Eastman Road

City
South Range

State
WI

Zip Code
54874

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

449.53

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211793

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VERBUS, MICHAEL, , ,

Mailing Address 2010 6th Street SW

City
Canton

State
OH

Zip Code
44706

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/CANTON

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 22 / 2018

Transaction ID : SA11AI.210848

Amount of Each Receipt this Period

9.62

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

59.62

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1258 OF 1411

(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. VERBUS, MICHAEL, , ,

Mailing Address 2010 6th Street SW

City
CantonState
OHZip Code
44706FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/CANTONOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.26

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.210849

Amount of Each Receipt this Period

9.62

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VERBUS, MICHAEL, , ,

Mailing Address 2010 6th Street SW

City
CantonState
OHZip Code
44706FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/CANTONOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.88

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	13	2018

Transaction ID : SA11AI.210850

Amount of Each Receipt this Period

9.62

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VERBUS, MICHAEL, , ,

Mailing Address 2010 6th Street SW

City
CantonState
OHZip Code
44706FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/CANTONOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.50

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	26	2018

Transaction ID : SA11AI.210954

Amount of Each Receipt this Period

9.62

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

28.86

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1259 OF 1411

(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. VERNACI, ELIZABETH, A., ,

Mailing Address 8289 Adenlee Avenue

City
Fairfax

State
VA

Zip Code
22031

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
RESEARCH LIBRARIAN I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

681.46

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206495

Amount of Each Receipt this Period

34.55

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VERNACI, ELIZABETH, A., ,

Mailing Address 8289 Adenlee Avenue

City
Fairfax

State
VA

Zip Code
22031

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
RESEARCH LIBRARIAN I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

716.01

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206881

Amount of Each Receipt this Period

34.55

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VILLAGOMEZ, ANTONIO, , ,

Mailing Address 12617 Brickyard Blvd.

City
Beltsville

State
MD

Zip Code
20705

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
NETWORK ANALYST II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206882

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

79.10

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1260 OF 1411

(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. VIS, SUSAN, K., ,

Mailing Address 210 N 2nd Street W

City
Hills

State
MN

Zip Code
56138

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 01 / 2018

Transaction ID : SA11AI.211794

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VITZILEOS, JENNY, , ,

Mailing Address 536 Corrinthia Drive

City

Elk Grove Villa

State

IL

Zip Code

60007

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

638.02

Date of Receipt

11 / 05 / 2018

Transaction ID : SA11AI.208371

Amount of Each Receipt this Period

63.80

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VON NORDECK, MARIANNE, P., ,

Mailing Address 3003 Van Ness Street NW
Apt. S1024

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
MANAGER, COMMUNICATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1500.28

Date of Receipt

10 / 31 / 2018

Transaction ID : SA11AI.206498

Amount of Each Receipt this Period

75.77

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

159.57

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1261 OF 1411

(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. VON NORDECK, MARIANNE, P., ,Mailing Address 3003 Van Ness Street NW
Apt. S1024City
WashingtonState
DCZip Code
20008FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
MANAGER, COMMUNICATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1541.61

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		1	5			2	0	1	8		

Transaction ID : SA11AI.206884

Amount of Each Receipt this Period

41.33

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WACKER, ANNIE, , ,

Mailing Address 326 S. 82nd Street

City

Milwaukee

State

WI

Zip Code

53214

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WI CN 32/LOCAL 1954Occupation (for Individual)
CUSTODIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	1			2	0	1	8		

Transaction ID : SA11AI.211453

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WADE, MELVIN, H., ,

Mailing Address 1227 Sanger Street

City

Philadelphia

State

PA

Zip Code

19124

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

242.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			3	1			2	0	1	8		

Transaction ID : SA11AI.207183

Amount of Each Receipt this Period

22.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

113.33

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 1262 OF 1411

(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. WADLEY, DOROTHY, J., ,

Mailing Address P.O. Box 352422

City
Toledo

State
OH

Zip Code
43635

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ODJFS CUSTOMER REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209275

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WADLEY, DOROTHY, J., ,

Mailing Address P.O. Box 352422

City
Toledo

State
OH

Zip Code
43635

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ODJFS CUSTOMER REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209906

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WADLEY, DOROTHY, J., ,

Mailing Address P.O. Box 352422

City
Toledo

State
OH

Zip Code
43635

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ODJFS CUSTOMER REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210573

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

39.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1263 OF 1411

(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. WAGHRAY, NAMITA, , ,

Mailing Address 28310 Center Ridge Road

City
Westlake

State
OH

Zip Code
44145

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

STRATEGIC COMMUNICATION ASST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1133.08

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206499

Amount of Each Receipt this Period

57.68

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WAGHRAY, NAMITA, , ,

Mailing Address 28310 Center Ridge Road

City
Westlake

State
OH

Zip Code
44145

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

STRATEGIC COMMUNICATION ASST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1190.76

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206885

Amount of Each Receipt this Period

57.68

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WAGONER, SUSAN, L., ,

Mailing Address 5434 Briardale Lane
Apt. E

City
Dublin

State
OH

Zip Code
43016

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH CN 8

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

889.42

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210955

Amount of Each Receipt this Period

81.22

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

196.58

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1264 OF 1411

(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. WALKER, CRAIG, S., ,

Mailing Address 2530 Homestead Avenue

City

Youngstown

State

OH

Zip Code

44502

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 ▼

290.40

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209276

Amount of Each Receipt this Period

13.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WALKER, CRAIG, S., ,

Mailing Address 2530 Homestead Avenue

City

Youngstown

State

OH

Zip Code

44502

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 ▼

303.60

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209907

Amount of Each Receipt this Period

13.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WALKER, CRAIG, S., ,

Mailing Address 2530 Homestead Avenue

City

Youngstown

State

OH

Zip Code

44502

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 ▼

316.80

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210574

Amount of Each Receipt this Period

13.20

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

39.60

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1265 OF 1411

(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. WALKER, KIMBERLY, D., ,

Mailing Address P.O. Box 482

City
Butler

State
OH

Zip Code
44822

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210575

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WALKER, PARIS, R., ,

Mailing Address 1600 Maryland Avenue NE
Unit 243

City
Washington

State
DC

Zip Code
20002

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ASSIST. DIRECTOR, EDUCATION & T

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

982.62

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206500

Amount of Each Receipt this Period

47.85

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WALKER, PARIS, R., ,

Mailing Address 1600 Maryland Avenue NE
Unit 243

City
Washington

State
DC

Zip Code
20002

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
ASSIST. DIRECTOR, EDUCATION & T

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1030.47

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206886

Amount of Each Receipt this Period

47.85

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

104.20

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1266 OF 1411

(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. WALKER, RUTH, E., ,

Mailing Address 1374 Mailani Street

City
Hilo

State
HI

Zip Code
96720

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI RET CHPT 152

Occupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.35

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211052

Amount of Each Receipt this Period

20.85

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WALKER-DAMPIER, TERRY, L., ,

Mailing Address P.O. Box 4672

City
Modesto

State
CA

Zip Code
95352

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 3930

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211169

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WALLACE, CARL, D., ,

Mailing Address 1984 Turkey Foot Road

City
Wheelersburg

State
OH

Zip Code
45694

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209278

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.85

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1267 OF 1411

(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. WALLACE, CARL, D., ,

Mailing Address 1984 Turkey Foot Road

City
WheelersburgState
OHZip Code
45694FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209909

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WALLACE, CARL, D., ,

Mailing Address 1984 Turkey Foot Road

City
WheelersburgState
OHZip Code
45694FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210576

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WALLER, PATRICIA, J., ,

Mailing Address 33986 State Route 681 S

City
AlbanyState
OHZip Code
45710FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/O'BLENESS MHOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

297.02

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.210851

Amount of Each Receipt this Period

9.62

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

29.62

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1268 OF 1411

(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. WALLER, PATRICIA, J., ,

Mailing Address 33986 State Route 681 S

City
Albany

State
OH

Zip Code
45710

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/O'BLENESS MH

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.64

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210852

Amount of Each Receipt this Period

9.62

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WALLER, PATRICIA, J., ,

Mailing Address 33986 State Route 681 S

City
Albany

State
OH

Zip Code
45710

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/O'BLENESS MH

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.14

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210859

Amount of Each Receipt this Period

9.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WALLER, PATRICIA, J., ,

Mailing Address 33986 State Route 681 S

City
Albany

State
OH

Zip Code
45710

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/O'BLENESS MH

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

325.76

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 19 / 2018

Transaction ID : SA11AI.210956

Amount of Each Receipt this Period

9.62

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

28.74

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1269 OF 1411

(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. WALLINGFORD, ROBERT, L ., ,

Mailing Address 281 Forest Street

City
MarionState
OHZip Code
43302FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.209279

Amount of Each Receipt this Period

9.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WALLINGFORD, ROBERT, L ., ,

Mailing Address 281 Forest Street

City
MarionState
OHZip Code
43302FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.50

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209910

Amount of Each Receipt this Period

9.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WALLINGFORD, ROBERT, L ., ,

Mailing Address 281 Forest Street

City
MarionState
OHZip Code
43302FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210577

Amount of Each Receipt this Period

9.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

28.50

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 1270 OF 1411

(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. WALLS, ANGELA, R., ,

Mailing Address 1260 Stone Ridge Drive
Apt. C

City State Zip Code
Columbus OH 43213

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210578

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WALTON, CHRISTOPHER, M., ,

Mailing Address 914 Cannondale Avenue

City State Zip Code
Xenia OH 45385

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 ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209281

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WALTON, CHRISTOPHER, M., ,

Mailing Address 914 Cannondale Avenue

City State Zip Code
Xenia OH 45385

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 ▼

322.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209912

Amount of Each Receipt this Period

14.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

36.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1271 OF 1411

(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. WALTON, CHRISTOPHER, M., ,

Mailing Address 914 Cannondale Avenue

City
Xenia

State
OH

Zip Code
45385

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 ▼

336.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210579

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WALTON, LORRIE, L., ,

Mailing Address 604 S Rock Street

City
Centralia

State
WA

Zip Code
98531

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/COMM COLLEGE

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 25 / 2018

Transaction ID : SA11AI.207530

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WALTON, LORRIE, L., ,

Mailing Address 604 S Rock Street

City
Centralia

State
WA

Zip Code
98531

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/COMM COLLEGE

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207733

Amount of Each Receipt this Period

10.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

35.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1272 OF 1411

(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. WALTON, LORRIE, L., ,

Mailing Address 604 S Rock Street

City
CentraliaState
WAZip Code
98531FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/COMM COLLEGEOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2018

Transaction ID : SA11AI.207977

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WANGSNESS, ERYK, R., ,

Mailing Address 58984 211th Lane

City
MankatoState
MNZip Code
56001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MNOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2018

Transaction ID : SA11AI.211795

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WARD, JAMES, S., ,Mailing Address 1887 Tamarack Circle S
Apt. BCity
ColumbusState
OHZip Code
43229FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
DELIVERY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.209913

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

39.50

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 1273 OF 1411

(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. WARD, JAMES, S., , Mailing Address 1887 Tamarack Circle S Apt. B <table> <tr> <td>City Columbus</td> <td>State OH</td> <td>Zip Code 43229</td> </tr> </table> FEC ID number of contributing federal political committee. C <table> <tr> <td>Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH</td> <td>Occupation (for Individual) DELIVERY WORKER</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 216.00			City Columbus	State OH	Zip Code 43229	Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) DELIVERY WORKER	Date of Receipt <table> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td>/</td> <td>23</td> <td>/</td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.210580 Amount of Each Receipt this Period <table> <tr> <td>44.00</td> </tr> </table> ☐ Memo Item		M M M	/	D D D	/	Y Y Y Y Y Y	11	/	23	/	2018	44.00
City Columbus	State OH	Zip Code 43229																		
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) DELIVERY WORKER																			
M M M	/	D D D	/	Y Y Y Y Y Y																
11	/	23	/	2018																
44.00																				
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WARD, KENNALE, , , Mailing Address 1829 Bluefield Place <table> <tr> <td>City Cincinnati</td> <td>State OH</td> <td>Zip Code 45237</td> </tr> </table> FEC ID number of contributing federal political committee. C <table> <tr> <td>Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH</td> <td>Occupation (for Individual) CUSTOMER SERVICES REP</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 297.50			City Cincinnati	State OH	Zip Code 45237	Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) CUSTOMER SERVICES REP	Date of Receipt <table> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td>/</td> <td>26</td> <td>/</td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.209283 Amount of Each Receipt this Period <table> <tr> <td>17.50</td> </tr> </table> ☐ Memo Item		M M M	/	D D D	/	Y Y Y Y Y Y	10	/	26	/	2018	17.50
City Cincinnati	State OH	Zip Code 45237																		
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) CUSTOMER SERVICES REP																			
M M M	/	D D D	/	Y Y Y Y Y Y																
10	/	26	/	2018																
17.50																				
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WARD, KENNALE, , , Mailing Address 1829 Bluefield Place <table> <tr> <td>City Cincinnati</td> <td>State OH</td> <td>Zip Code 45237</td> </tr> </table> FEC ID number of contributing federal political committee. C <table> <tr> <td>Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH</td> <td>Occupation (for Individual) CUSTOMER SERVICES REP</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) Aggregate Year-to-Date ▼ 315.00			City Cincinnati	State OH	Zip Code 45237	Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) CUSTOMER SERVICES REP	Date of Receipt <table> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td>/</td> <td>09</td> <td>/</td> <td>2018</td> </tr> </table> Transaction ID : SA11AI.209914 Amount of Each Receipt this Period <table> <tr> <td>17.50</td> </tr> </table> ☐ Memo Item		M M M	/	D D D	/	Y Y Y Y Y Y	11	/	09	/	2018	17.50
City Cincinnati	State OH	Zip Code 45237																		
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) CUSTOMER SERVICES REP																			
M M M	/	D D D	/	Y Y Y Y Y Y																
11	/	09	/	2018																
17.50																				
SUBTOTAL of Receipts This Page (optional).....▶			<table> <tr> <td>44.00</td> </tr> </table>		44.00															
44.00																				
TOTAL This Period (last page this line number only).....▶			<table> <tr> <td></td> </tr> </table>																	

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1274 OF 1411

(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. WARD, KENNALE, , ,

Mailing Address 1829 Bluefield Place

City
Cincinnati

State
OH

Zip Code
45237

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210581

Amount of Each Receipt this Period

17.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WARD, LUCILLE, E., ,

Mailing Address 4333 Clock Court

City
Columbus

State
OH

Zip Code
43230

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
IT TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209284

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WARD, LUCILLE, E., ,

Mailing Address 4333 Clock Court

City
Columbus

State
OH

Zip Code
43230

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
IT TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209915

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

43.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1275 OF 1411

(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. WARD, LUCILLE, E., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 4333 Clock Court City Columbus State OH Zip Code 43230 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH Occupation (for Individual) IT TECHNICIAN Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 312.00			Date of Receipt M M / D D / Y Y Y Y Y 11 / 23 / 2018 Transaction ID : SA11AI.210582 Amount of Each Receipt this Period 13.00 ☐ Memo Item
B. WARE, CHRISTOPHER, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 296 Churchmans Road City New Castle State DE Zip Code 19720 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME DE CN 81 Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 237.02			Date of Receipt M M / D D / Y Y Y Y Y 10 / 19 / 2018 Transaction ID : SA11AI.211266 Amount of Each Receipt this Period 25.24 ☐ Memo Item
C. WARE, CHRISTOPHER, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 296 Churchmans Road City New Castle State DE Zip Code 19720 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME DE CN 81 Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 262.26			Date of Receipt M M / D D / Y Y Y Y Y 11 / 14 / 2018 Transaction ID : SA11AI.211273 Amount of Each Receipt this Period 25.24 ☐ Memo Item
SUBTOTAL of Receipts This Page (optional)..... ▶			63.48
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 1276 OF 1411

(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. WAREHAM, LORRAINE, K., ,

Mailing Address 3604 Teakwood

City
Springfield

State
IL

Zip Code
62712

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
MANPOWER PLANNER III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208372

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WARREN, ANDREA, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 25 / 2018

Transaction ID : SA11AI.207531

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WARREN, ANDREA, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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 Y
11 / 09 / 2018

Transaction ID : SA11AI.207734

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 1277 OF 1411

(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. WARREN, ANDREA, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M	D D	Y Y Y Y
11	26	2018

Transaction ID : SA11AI.207978

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WARREN, JOHN, A., ,

Mailing Address 535 Valewood Lane

City
DaytonState
OHZip Code
45405FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M	D D	Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210583

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WARREN, WILLIAM, R., ,

Mailing Address 5029 N Elm Street

City
SpokaneState
WAZip Code
99205FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/COMM COLLEGEOccupation (for Individual)
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
11	09	2018

Transaction ID : SA11AI.207735

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

38.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1278 OF 1411

(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. WARREN, WILLIAM, R., ,

Mailing Address 5029 N Elm Street

City
SpokaneState
WAZip Code
99205FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/COMM COLLEGEOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	26	2018

Transaction ID : SA11AI.207979

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WASHINGTON, DON CARLOS, , ,

Mailing Address 22 E Yale Avenue

City
PontiacState
MIZip Code
48341FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MI CN 25/LOCAL 1820Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	16	2018

Transaction ID : SA11AI.211403

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WASHINGTON, JENNIFER, L., ,

Mailing Address 1701 Pebble Beach Drive

City
PlainfieldState
ILZip Code
60586FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
CORRECTIONAL OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	05	2018

Transaction ID : SA11AI.208373

Amount of Each Receipt this Period

42.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

62.00

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 1279 OF 1411

(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. WASHINGTON, LUTHER, , ,

Mailing Address 10403 Chepstow Place

City
Cheltenham

State
MD

Zip Code
20623

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
MEMBERSHIP TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206502

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WASHINGTON, LUTHER, , ,

Mailing Address 10403 Chepstow Place

City
Cheltenham

State
MD

Zip Code
20623

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
MEMBERSHIP TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206888

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WATARU, JAMES, , ,

Mailing Address 1426 North School Street

City
Honolulu

State
HI

Zip Code
96817

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 646

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

544.37

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.211293

Amount of Each Receipt this Period

41.67

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

71.67

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1280 OF 1411

(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. WATKINS, ELWYN, L., ,Mailing Address 95-794 Wilao Street
Apt. Q204City
MillaniState
HIZip Code
96789FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 152Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.24

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2018			

Transaction ID : SA11AI.211023

Amount of Each Receipt this Period

20.84

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WATKINS, JACQUELYN, M., ,

Mailing Address 1566 Smith Road

City
ColumbusState
OHZip Code
43207FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2018			

Transaction ID : SA11AI.209286

Amount of Each Receipt this Period

15.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WATKINS, JACQUELYN, M., ,

Mailing Address 1566 Smith Road

City
ColumbusState
OHZip Code
43207FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

356.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			09			2018			

Transaction ID : SA11AI.209917

Amount of Each Receipt this Period

15.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

51.84

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 1281 OF 1411

(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. WATKINS, JACQUELYN, M., ,

Mailing Address 1566 Smith Road

 City
 Columbus

 State
 OH

 Zip Code
 43207

 FEC ID number of contributing
 federal political committee.

 C

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

 372.00

Date of Receipt

 M M / D D / Y Y Y Y
 11 / 23 / 2018

Transaction ID : SA11AI.210584

Amount of Each Receipt this Period

 15.50
☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WATKINS, MARJOYCE, , ,

 Mailing Address 2656 Euclid Heights Blvd.
 Apt. 201

 City
 Cleveland Heights

 State
 OH

 Zip Code
 44106

 FEC ID number of contributing
 federal political committee.

 C

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 ODJFS CUSTOMER REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

 220.00

Date of Receipt

 M M / D D / Y Y Y Y
 10 / 26 / 2018

Transaction ID : SA11AI.209287

Amount of Each Receipt this Period

 10.00
☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WATKINS, MARJOYCE, , ,

 Mailing Address 2656 Euclid Heights Blvd.
 Apt. 201

 City
 Cleveland Heights

 State
 OH

 Zip Code
 44106

 FEC ID number of contributing
 federal political committee.

 C

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 ODJFS CUSTOMER REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

 230.00

Date of Receipt

 M M / D D / Y Y Y Y
 11 / 09 / 2018

Transaction ID : SA11AI.209918

Amount of Each Receipt this Period

 10.00
☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

 35.50
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 1282 OF 1411

(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. WATKINS, MARJOYCE, , ,

 Mailing Address 2656 Euclid Heights Blvd.
 Apt. 201

City	State	Zip Code
Cleveland Heights	OH	44106

FEC ID number of contributing federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 ODJFS CUSTOMER REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210585

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WATKINS, SCOTT, , ,

Mailing Address 1212 Jefferson Street SE

City	State	Zip Code
Olympia	WA	98501

FEC ID number of contributing federal political committee.

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.207736

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WATKINS, SCOTT, , ,

Mailing Address 1212 Jefferson Street SE

City	State	Zip Code
Olympia	WA	98501

FEC ID number of contributing federal political committee.

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2018

Transaction ID : SA11AI.207980

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1283 OF 1411

(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. WATSON, ALLEN, O., ,

Mailing Address 8608 Glen Hannah Court

City

Windsor Mill

State

MD

Zip Code

21244

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ORGANIZER II

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1275.62

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206504

Amount of Each Receipt this Period

65.78

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WATSON, ALLEN, O., ,

Mailing Address 8608 Glen Hannah Court

City

Windsor Mill

State

MD

Zip Code

21244

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ORGANIZER II

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1341.40

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206890

Amount of Each Receipt this Period

65.78

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WATSON, ANTONIO, D., ,

Mailing Address 1320 Elmside Street

City

Alliance

State

OH

Zip Code

44601

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
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209288

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

144.56

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1284 OF 1411

(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. WATSON, ANTONIO, D., ,

Mailing Address 1320 Elmside Street

City
Alliance

State
OH

Zip Code
44601

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 ▼

299.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209919

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WATSON, ANTONIO, D., ,

Mailing Address 1320 Elmside Street

City
Alliance

State
OH

Zip Code
44601

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 ▼

312.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210586

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WATSON, DOMINIC, , ,

Mailing Address 506 South Glenwood Avenue

City
Springfield

State
IL

Zip Code
62704

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

487.80

Date of Receipt

11 / 05 / 2018

Transaction ID : SA11AI.208374

Amount of Each Receipt this Period

65.04

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

91.04

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 1285 OF 1411

(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. WATSON, KEVIN, J., ,

Mailing Address 1771 225th Place

City

Sauk Village

State

IL

Zip Code

60411

FEC ID number of contributing federal political committee.

Name of Employer (for Individual)

AFSCME IL CN 31

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

Transaction ID : SA11AI.208375

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WATSON, TIMOTHY, , ,

Mailing Address 10723 Kilburn Lane

City

Cambridge

State

OH

Zip Code

43725

FEC ID number of contributing federal political committee.

Name of Employer (for Individual)

AFSCME OH LOC 11

Occupation (for Individual)

THERAPUTIC PROGRAM CORDINAT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2018

Transaction ID : SA11AI.210587

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WATTS, DONNA, , ,

Mailing Address 1212 Jefferson Street SE

City

Olympia

State

WA

Zip Code

98501

FEC ID number of contributing federal political committee.

Name of Employer (for Individual)

AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.207737

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1286 OF 1411

(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. WATTS, DONNA, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 26 / 2018

Transaction ID : SA11AI.207981

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WATTS, MIA, D., ,

Mailing Address 17122 Fairway View Lane

City
Upper Marlboro

State
MD

Zip Code
20772

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
STAFF ACCOUNTANT I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.91

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206505

Amount of Each Receipt this Period

32.73

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WATTS, MIA, D., ,

Mailing Address 17122 Fairway View Lane

City
Upper Marlboro

State
MD

Zip Code
20772

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
STAFF ACCOUNTANT I

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

618.64

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206891

Amount of Each Receipt this Period

32.73

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.46

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1287 OF 1411

(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. WAUGH, JO ANN, , ,

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 ▼

862.62

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207184

Amount of Each Receipt this Period

78.42

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WAYBRIGHT, LONITA, M., ,

Mailing Address 3929 Whitmarsh Lane

City
Edgewater

State
MD

Zip Code
21037

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
DIRECTOR, BENEFITS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1495.52

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206506

Amount of Each Receipt this Period

72.11

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WAYBRIGHT, LONITA, M., ,

Mailing Address 3929 Whitmarsh Lane

City
Edgewater

State
MD

Zip Code
21037

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
DIRECTOR, BENEFITS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1567.63

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206892

Amount of Each Receipt this Period

72.11

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

222.64

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1288 OF 1411

(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. WEATHERSPOON, DONITA, , ,

Mailing Address 6156 Hanby Square E

City
Columbus

State
OH

Zip Code
43229

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
TRANSPORTATION CORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

606.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209289

Amount of Each Receipt this Period

31.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WEATHERSPOON, DONITA, , ,

Mailing Address 6156 Hanby Square E

City
Columbus

State
OH

Zip Code
43229

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
TRANSPORTATION CORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

637.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209920

Amount of Each Receipt this Period

31.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WEATHERSPOON, DONITA, , ,

Mailing Address 6156 Hanby Square E

City
Columbus

State
OH

Zip Code
43229

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
TRANSPORTATION CORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

668.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210588

Amount of Each Receipt this Period

31.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

93.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1289 OF 1411

(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. WEAVER, DEBORAH, L., , Mailing Address 15318 Judson Drive City Cleveland State OH Zip Code 44128 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 319.00			Date of Receipt 10 / 26 / 2018 Transaction ID : SA11AI.209290 Amount of Each Receipt this Period 14.50 ☐ Memo Item	
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WEAVER, DEBORAH, L., , Mailing Address 15318 Judson Drive City Cleveland State OH Zip Code 44128 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 333.50			Date of Receipt 11 / 09 / 2018 Transaction ID : SA11AI.209921 Amount of Each Receipt this Period 14.50 ☐ Memo Item	
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WEAVER, DEBORAH, L., , Mailing Address 15318 Judson Drive City Cleveland State OH Zip Code 44128 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) Aggregate Year-to-Date ▼ 348.00			Date of Receipt 11 / 23 / 2018 Transaction ID : SA11AI.210589 Amount of Each Receipt this Period 14.50 ☐ Memo Item	
SUBTOTAL of Receipts This Page (optional)..... ▶			43.50	
TOTAL This Period (last page this line number only)..... ▶				

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1290 OF 1411

(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. WEAVER, JANA, , ,

Mailing Address 451 London Road

City
DeerfieldState
WIZip Code
53531FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
FIELD COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1056.34

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206507

Amount of Each Receipt this Period

49.59

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WEAVER, JANA, , ,

Mailing Address 451 London Road

City
DeerfieldState
WIZip Code
53531FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
FIELD COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1105.93

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	15	2018

Transaction ID : SA11AI.206893

Amount of Each Receipt this Period

49.59

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WEAVER, WADE, R., ,

Mailing Address 955 Penn Street

City
New BethlehemState
PAZip Code
16242FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.207185

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

149.18

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1291 OF 1411

(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. WEBB, BRENDA, , ,

Mailing Address 4031 Executive Park Drive

City
HarrisburgState
PAZip Code
17111FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.08

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			08			2018			

Transaction ID : SA11AI.207186

Amount of Each Receipt this Period

72.52

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WEBB-GAUVIN, JOANNA, L., ,Mailing Address 1200 W. Lawrence
#12City
SpringfieldState
ILZip Code
62704FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31Occupation (for Individual)
RETIREE PROGRAMS DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.61

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2018			

Transaction ID : SA11AI.208376

Amount of Each Receipt this Period

85.06

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WEEKS, BRIAN, V., ,

Mailing Address 1522 A Street NE

City
WashingtonState
DCZip Code
20002FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
DIRECTOR, POLITICAL ACTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1672.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2018			

Transaction ID : SA11AI.206508

Amount of Each Receipt this Period

80.35

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

237.93

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1292 OF 1411

(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. WEEKS, BRIAN, V., ,

Mailing Address 1522 A Street NE

City
WashingtonState
DCZip Code
20002FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
DIRECTOR, POLITICAL ACTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1752.35

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			1	5			2	0	1	8		

Transaction ID : SA11AI.206894

Amount of Each Receipt this Period

80.35

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WEIDEMIER, MARK, C., ,

Mailing Address 1406 Heritage Road

City
NormalState
ILZip Code
61761FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF ILOccupation (for Individual)
EMPL SECUR SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	5			2	0	1	8		

Transaction ID : SA11AI.208377

Amount of Each Receipt this Period

33.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WEIDLING, CATHERINE, W., ,Mailing Address 251 Robinson Street
#105City
Los AngelesState
CAZip Code
90026FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
FIELD EDUCATION COORDINATOR II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

691.66

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			3	1			2	0	1	8		

Transaction ID : SA11AI.206509

Amount of Each Receipt this Period

35.44

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

148.79

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1293 OF 1411

(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. WEIDLING, CATHERINE, W., ,

Mailing Address 251 Robinson Street
#105

City
Los Angeles

State
CA

Zip Code
90026

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

FIELD EDUCATION COORDINATOR II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

727.10

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206895

Amount of Each Receipt this Period

35.44

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WEIDNER, JOSEPH, W., ,

Mailing Address 255 Binns Boulevard

City
Columbus

State
OH

Zip Code
43204-2515

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH CN 8

Occupation (for Individual)

EDITOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

773.34

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210959

Amount of Each Receipt this Period

70.62

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WEIKEL, MAXIMUS, J., ,

Mailing Address 234 Smithtown Road

City
Pipersville

State
PA

Zip Code
18947

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME PA CN 13

Occupation (for Individual)

ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

686.10

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207187

Amount of Each Receipt this Period

66.64

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

172.70

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1294 OF 1411

(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. WEINSTEIN, JESSICA, , ,

Mailing Address 2662 Wild Turkey Lane

City
Alexandria

State
VA

Zip Code
22314

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ASSISTANT TO THE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2231.80

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206510

Amount of Each Receipt this Period

100.39

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WEINSTEIN, JESSICA, , ,

Mailing Address 2662 Wild Turkey Lane

City
Alexandria

State
VA

Zip Code
22314

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ASSISTANT TO THE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2332.19

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206896

Amount of Each Receipt this Period

100.39

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WELDON, SUSAN, , ,

Mailing Address 16 Fairfield Street

City
Harrisburg

State
PA

Zip Code
17109

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME PA CN 13/NSP/LOCAL 521

Occupation (for Individual)

CONTROL ROOM OPERATOR II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

806.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207188

Amount of Each Receipt this Period

62.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

262.78

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 1295 OF 1411

(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. WELLES, CHRISTOPHER RYAN, , ,

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 (for Individual)

AFSCME MN CN 5/CN14

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

671.94

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211796

Amount of Each Receipt this Period

64.24

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WELLMAN, DONNA, M., ,

Mailing Address 125 school Court
P.O. Box 391

City

Cedarville

State

IL

Zip Code

61013

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

HUMAN SERVICES CASEWORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208378

Amount of Each Receipt this Period

33.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WELLS, MICHAEL, J., ,

Mailing Address 20 Indian Wood Drive

City

Thornville

State

OH

Zip Code

43076

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

OFFICE ASSISTANT II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209291

Amount of Each Receipt this Period

14.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

111.24

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 1296 OF 1411

(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. **WELLS, MICHAEL, J., ,**

Mailing Address 20 Indian Wood Drive

 City
 Thornville

 State
 OH

 Zip Code
 43076

FEC ID number of contributing federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 OFFICE ASSISTANT II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.209922

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **WELLS, MICHAEL, J., ,**

Mailing Address 20 Indian Wood Drive

 City
 Thornville

 State
 OH

 Zip Code
 43076

FEC ID number of contributing federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 OFFICE ASSISTANT II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210590

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **WENGER, JACKLEEN, , ,**

Mailing Address 4031 Executive Park Drive

 City
 Harrisburg

 State
 PA

 Zip Code
 17111

FEC ID number of contributing federal political committee.

 Name of Employer (for Individual)
 AFSCME PA CN 13

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2018

Transaction ID : SA11AI.207189

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 1297 OF 1411

(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. **WERNER, JAMES, K., ,**

Mailing Address 1426 North School Street

 City
 Honolulu

 State
 HI

 Zip Code
 96817

FEC ID number of contributing federal political committee.

Name of Employer (for Individual)

AFSCME HI LOC 646

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	D D	Y Y Y Y
11	09	2018

Transaction ID : SA11AI.211294

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **WERNER, KALANI, K., ,**

Mailing Address 1426 North School Street

 City
 Honolulu

 State
 HI

 Zip Code
 96817

FEC ID number of contributing federal political committee.

Name of Employer (for Individual)

AFSCME HI LOC 646

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	D D	Y Y Y Y
11	09	2018

Transaction ID : SA11AI.211295

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **WESTMORELAND, JOHN, P., ,**

Mailing Address 4678 West Road

 City
 Moose Lake

 State
 MN

 Zip Code
 55767

FEC ID number of contributing federal political committee.

Name of Employer (for Individual)

AFSCME MN CN 5/CN14

Occupation (for Individual)

BUSINESS AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	D D	Y Y Y Y
11	01	2018

Transaction ID : SA11AI.211797

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1298 OF 1411

(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. WEYER, KEVIN, A., ,

Mailing Address 1216 Wilson Avenue

City
Vickery

State
OH

Zip Code
43464

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
MAINTENANCE REPAIR TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209292

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WEYER, KEVIN, A., ,

Mailing Address 1216 Wilson Avenue

City
Vickery

State
OH

Zip Code
43464

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
MAINTENANCE REPAIR TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209923

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WEYER, KEVIN, A., ,

Mailing Address 1216 Wilson Avenue

City
Vickery

State
OH

Zip Code
43464

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
MAINTENANCE REPAIR TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210591

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1299 OF 1411

(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. WHALEN-WEAVER, JEANNE, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.207738

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WHALEN-WEAVER, JEANNE, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	26	2018

Transaction ID : SA11AI.207982

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WHEELER, JEFREY, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.207739

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

30.00

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 1300 OF 1411

(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. WHEELER, JEFREY, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 26 / 2018

Transaction ID : SA11AI.207983

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WHICKER, CYNTHIA, L ., ,

Mailing Address 2494 Stoneleigh Court

City
Dublin

State
OH

Zip Code
43016

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ADMINISTRATIVE PROFESSIONAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209293

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WHICKER, CYNTHIA, L ., ,

Mailing Address 2494 Stoneleigh Court

City
Dublin

State
OH

Zip Code
43016

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ADMINISTRATIVE PROFESSIONAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

253.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209924

Amount of Each Receipt this Period

11.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

32.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1301 OF 1411

(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. WHICKER, CYNTHIA, L ., ,

Mailing Address 2494 Stoneleigh Court

City
Dublin

State
OH

Zip Code
43016

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
ADMINISTRATIVE PROFESSIONAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210592

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WHISMAN, DAVID, , ,

Mailing Address 80 Farview

City

San Francisco

State
CA

Zip Code
94131

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA CN 57

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.40

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211254

Amount of Each Receipt this Period

16.70

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WHITE, FREDERICK, M., ,

Mailing Address 1039 Lupine Court

City

Reynoldsburg

State
OH

Zip Code
43068

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
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
10 / 26 / 2018

Transaction ID : SA11AI.209294

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

37.70

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1302 OF 1411

(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. WHITE, FREDERICK, M., ,

Mailing Address 1039 Lupine Court

City

Reynoldsburg

State

OH

Zip Code

43068

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209925

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WHITE, FREDERICK, M., ,

Mailing Address 1039 Lupine Court

City

Reynoldsburg

State

OH

Zip Code

43068

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210593

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WHITE, JANET, E., ,

Mailing Address 14235 Lorain Avenue
#12

City

Cleveland

State

OH

Zip Code

44111

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

OFFICE PROFESSIONAL

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

204.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210594

Amount of Each Receipt this Period

8.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

28.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1303 OF 1411

(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. WHITE, JEANETTE, C., ,

Mailing Address 7903 189th Place SW

City
Edmonds

State
WA

Zip Code
98026

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 09 / 2018

Transaction ID : SA11AI.207740

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WHITE, JEANETTE, C., ,

Mailing Address 7903 189th Place SW

City
Edmonds

State
WA

Zip Code
98026

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 26 / 2018

Transaction ID : SA11AI.207984

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WHITE, JOHNNY, B., ,

Mailing Address 1253 Chalet Drive

City
Sandusky

State
OH

Zip Code
44870

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
GROUNDSKEEPER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209296

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

33.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1304 OF 1411

(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. WHITE, JOHNNY, B., ,

Mailing Address 1253 Chalet Drive

City
SanduskyState
OHZip Code
44870FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
GROUNDSKEEPER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209927

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WHITE, JOHNNY, B., ,

Mailing Address 1253 Chalet Drive

City
SanduskyState
OHZip Code
44870FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
GROUNDSKEEPER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210595

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WHITE, KENNETH, J., ,

Mailing Address 137 Wisconsin

City
ElyriaState
OHZip Code
44035FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.209297

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

36.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1305 OF 1411

(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. WHITE, KENNETH, J., ,

Mailing Address 137 Wisconsin

City
ElyriaState
OHZip Code
44035FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209928

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WHITE, KENNETH, J., ,

Mailing Address 137 Wisconsin

City
ElyriaState
OHZip Code
44035FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210596

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WHITE, LORETTA, R., ,

Mailing Address 1253 Chalet Drive

City
SanduskyState
OHZip Code
44870FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
HOSPITAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

352.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.209298

Amount of Each Receipt this Period

16.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

36.00

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 1306 OF 1411

(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. WHITE, LORETTA, R., ,

Mailing Address 1253 Chalet Drive

City
Sandusky

State
OH

Zip Code
44870

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HOSPITAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209929

Amount of Each Receipt this Period

16.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WHITE, LORETTA, R., ,

Mailing Address 1253 Chalet Drive

City
Sandusky

State
OH

Zip Code
44870

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HOSPITAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210597

Amount of Each Receipt this Period

16.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WHITE, MONICA, E., ,

Mailing Address 3985 Andrus Court E

City
Columbus

State
OH

Zip Code
43227

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
WORKERS COMP CLAIMS REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

204.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210598

Amount of Each Receipt this Period

8.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1307 OF 1411

(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. WHITE, ROBIN, , ,

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 (for Individual)
AFSCME IA CN 61

Occupation (for Individual)
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 Y
10 / 18 / 2018

Transaction ID : SA11AI.211881

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WHITE, ROBIN, , ,

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 (for Individual)
AFSCME IA CN 61

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.211936

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WHITEHEAD, DOMINIK, , ,

Mailing Address 1820 Deep Creek Blvd.

City
Portsmouth

State
VA

Zip Code
23704

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
POLITICAL ACTION REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

755.92

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206511

Amount of Each Receipt this Period

33.63

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

93.63

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1308 OF 1411

(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. WHITEHEAD, DOMINIK, , ,

Mailing Address 1820 Deep Creek Blvd.

City
PortsmouthState
VAZip Code
23704FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
POLITICAL ACTION REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

789.55

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	15	2018

Transaction ID : SA11AI.206897

Amount of Each Receipt this Period

33.63

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WHITESIDE, CAROL, , ,

Mailing Address 4031 Executive Park Drive

City
HarrisburgState
PAZip Code
17111FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.38

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	08	2018

Transaction ID : SA11AI.207190

Amount of Each Receipt this Period

29.58

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WHORLEY, VIRGINIA, E., ,Mailing Address 2201 L. Street NW
Apt. 314City
WashingtonState
DCZip Code
20037FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
POLITICAL AND FINANCE COMPLIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

619.03

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206512

Amount of Each Receipt this Period

31.86

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

95.07

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 1309 OF 1411

(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. WHORLEY, VIRGINIA, E., ,

Mailing Address 2201 L. Street NW
Apt. 314

City
Washington

State
DC

Zip Code
20037

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

POLITICAL AND FINANCE COMPLIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.89

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206898

Amount of Each Receipt this Period

31.86

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WIDENER, JEFFREY, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 09 / 2018

Transaction ID : SA11AI.207741

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WIDENER, JEFFREY, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 26 / 2018

Transaction ID : SA11AI.207985

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

51.86

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1310 OF 1411

(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. WIDGER, ANN, E., ,Mailing Address 1205 Morse Street NE
Unit 3City
WashingtonState
DCZip Code
20002FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
DIRECTOR, RETIREE PROGRAMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1557.20

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206513

Amount of Each Receipt this Period

72.11

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WIDGER, ANN, E., ,Mailing Address 1205 Morse Street NE
Unit 3City
WashingtonState
DCZip Code
20002FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
DIRECTOR, RETIREE PROGRAMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1629.31

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	15	2018

Transaction ID : SA11AI.206899

Amount of Each Receipt this Period

72.11

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WIGGINS, CLAUDE, H., ,

Mailing Address 618 Baldwin Avenue

City
ElyriaState
OHZip Code
44035FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.209300

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

157.22

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1311 OF 1411

(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. WIGGINS, CLAUDE, H., ,

Mailing Address 618 Baldwin Avenue

City
ElyriaState
OHZip Code
44035FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209931

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WIGGINS, CLAUDE, H., ,

Mailing Address 618 Baldwin Avenue

City
ElyriaState
OHZip Code
44035FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210599

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILDER, KENYATTA, , ,

Mailing Address 1442 E Blake Avenue

City
ColumbusState
OHZip Code
43211FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210600

Amount of Each Receipt this Period

8.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

34.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1312 OF 1411

(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. WILES, EDWARD, R., ,

Mailing Address 205 Space Avenue SW

City
MitchellvilleState
IAZip Code
50169FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/STATE OF IAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.82

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	8		2	0	1	8

Transaction ID : SA11AI.211862

Amount of Each Receipt this Period

10.42

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILES, EDWARD, R., ,

Mailing Address 205 Space Avenue SW

City
MitchellvilleState
IAZip Code
50169FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/STATE OF IAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.24

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	6		2	0	1	8

Transaction ID : SA11AI.211937

Amount of Each Receipt this Period

10.42

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILKINS, KARL, L., , JR.

Mailing Address 390 Worthington Road

City
WestervilleState
OHZip Code
43082FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	6		2	0	1	8

Transaction ID : SA11AI.210601

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

40.84

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1313 OF 1411

(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. WILLIAMS, ADRIAN, , ,Mailing Address 190 W. Ostend Street
Suite 101City
BaltimoreState
MDZip Code
21230FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MD CN 3Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.28

Date of Receipt

M M	D D	Y Y Y Y
11	07	2018

Transaction ID : SA11AI.211327

Amount of Each Receipt this Period

51.32

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILLIAMS, ANDREW, , ,

Mailing Address 4320 NW Second Avenue

City

Des Moines

State
IAZip Code
50313FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

448.40

Date of Receipt

M M	D D	Y Y Y Y
10	18	2018

Transaction ID : SA11AI.211882

Amount of Each Receipt this Period

44.84

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILLIAMS, ANDREW, , ,

Mailing Address 4320 NW Second Avenue

City

Des Moines

State
IAZip Code
50313FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

493.24

Date of Receipt

M M	D D	Y Y Y Y
11	06	2018

Transaction ID : SA11AI.211938

Amount of Each Receipt this Period

44.84

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

141.00

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 1314 OF 1411

(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. WILLIAMS, CARLA, , ,

Mailing Address 2338 N Spaulding
Apt. 2A

City
Chicago

State
IL

Zip Code
60647

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

762.79

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208379

Amount of Each Receipt this Period

76.28

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILLIAMS, DARLENE, M., ,

Mailing Address 4078 Klepinger Road

City
Dayton

State
OH

Zip Code
45416

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209302

Amount of Each Receipt this Period

14.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILLIAMS, DARLENE, M., ,

Mailing Address 4078 Klepinger Road

City
Dayton

State
OH

Zip Code
45416

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

333.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209933

Amount of Each Receipt this Period

14.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.28

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1315 OF 1411
(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. WILLIAMS, DARLENE, M., , Mailing Address 4078 Klepinger Road City Dayton State OH Zip Code 45416 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 348.00			Date of Receipt M M / D D / Y Y Y Y Y 11 / 23 / 2018 Transaction ID : SA11AI.210602 Amount of Each Receipt this Period 14.50 ☐ Memo Item	
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WILLIAMS, DENNIS, C., , Mailing Address 9651 S Sangamon City Chicago State IL Zip Code 60643 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME IL CN 31/STATE OF IL Occupation (for Individual) MENTAL HEALTH TECH I Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 522.00			Date of Receipt M M / D D / Y Y Y Y Y 11 / 05 / 2018 Transaction ID : SA11AI.208380 Amount of Each Receipt this Period 123.00 ☐ Memo Item	
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WILLIAMS, DONNA, J., , Mailing Address 10 Green Lane City Silver Bay State MN Zip Code 55614 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME MN CN 5/STATE OF MN Occupation (for Individual) 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 11 / 01 / 2018 Transaction ID : SA11AI.211798 Amount of Each Receipt this Period 20.00 ☐ Memo Item	
SUBTOTAL of Receipts This Page (optional)..... ▶			157.50	
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 1316 OF 1411

(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. WILLIAMS, DONNIE, R., ,

Mailing Address 10S140 Suffield Drive

City

Downers Grove

State

IL

Zip Code

60516

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

PUBLIC SVC ADMINISTRATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208381

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILLIAMS, ERNEST, T., ,

Mailing Address 4340 Varnum Place NE

City

Washington

State

DC

Zip Code

20017

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

SECURITY GUARD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.98

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206514

Amount of Each Receipt this Period

26.68

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILLIAMS, ERNEST, T., ,

Mailing Address 4340 Varnum Place NE

City

Washington

State

DC

Zip Code

20017

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

SECURITY GUARD

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

552.66

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206900

Amount of Each Receipt this Period

26.68

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

113.36

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1317 OF 1411

(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. WILLIAMS, FRANK, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 25 / 2018

Transaction ID : SA11AI.207539

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILLIAMS, FRANK, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207742

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILLIAMS, FRANK, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF 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 Y
11 / 26 / 2018

Transaction ID : SA11AI.207986

Amount of Each Receipt this Period

10.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

31.50

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1318 OF 1411

(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. WILLIAMS, KIMBERLY, , ,

Mailing Address 9826 84th Street Court W

City

Taylor Ridge

State

IL

Zip Code

61284

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 ADMIN

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

Transaction ID : SA11AI.208382

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILLIAMS, MATTHEW, B., ,

Mailing Address 260 Washington Avenue

City

London

State

OH

Zip Code

43140

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
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2018

Transaction ID : SA11AI.209303

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILLIAMS, MATTHEW, B., ,

Mailing Address 260 Washington Avenue

City

London

State

OH

Zip Code

43140

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
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.209934

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

66.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1319 OF 1411

(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. WILLIAMS, MATTHEW, B., ,

Mailing Address 260 Washington Avenue

City
LondonState
OHZip Code
43140FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210603

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILLIAMS, MELVIN, , ,

Mailing Address 2865 E 6th Avenue

City
ColumbusState
OHZip Code
43219FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209935

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILLIAMS, MELVIN, , ,

Mailing Address 2865 E 6th Avenue

City
ColumbusState
OHZip Code
43219FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210604

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

31.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1320 OF 1411

(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. WILLIAMS, MONIQUE, R., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 9617 Chamberlin Road City Twinsburg State OH Zip Code 44087 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH Occupation (for Individual) THERAPUTIC PROGRAM TECHNICIA Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 207.00		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 09 / 2018 Transaction ID : SA11AI.209936 Amount of Each Receipt this Period 9.00 ☐ Memo Item
B. WILLIAMS, MONIQUE, R., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 9617 Chamberlin Road City Twinsburg State OH Zip Code 44087 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH Occupation (for Individual) THERAPUTIC PROGRAM TECHNICIA Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 216.00		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 23 / 2018 Transaction ID : SA11AI.210605 Amount of Each Receipt this Period 9.00 ☐ Memo Item
C. WILLIAMS, ORSON, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 1212 Jefferson Street SE City Olympia State WA Zip Code 98501 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME WA CN 28/STATE OF WA Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 25 / 2018 Transaction ID : SA11AI.207540 Amount of Each Receipt this Period 15.00 ☐ Memo Item
SUBTOTAL of Receipts This Page (optional)..... ▶		33.00
TOTAL This Period (last page this line number only)..... ▶		

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1321 OF 1411

(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. WILLIAMS, ORSON, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.207743

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILLIAMS, ORSON, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	26	2018

Transaction ID : SA11AI.207987

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILLIAMS, ROBERT, , ,

Mailing Address 197 S Ukiah Way

City
UplandState
CAZip Code
91786FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 1902Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	19	2018

Transaction ID : SA11AI.211074

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

55.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1322 OF 1411

(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. WILLIAMS, ROBERT, , ,

Mailing Address 197 S Ukiah Way

City
UplandState
CAZip Code
91786FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 1902Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2018

Transaction ID : SA11AI.211095

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILLIAMS, ROBERT, , ,

Mailing Address 197 S Ukiah Way

City
UplandState
CAZip Code
91786FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 1902Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	20	/	2018

Transaction ID : SA11AI.211116

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILLIAMS, VINCENT, , ,

Mailing Address 4031 Executive Park Drive

City
HarrisburgState
PAZip Code
17111FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/NSP/LOCAL 297Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2018

Transaction ID : SA11AI.207191

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

70.00

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 1323 OF 1411

(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. WILLIAMSON, CHARLES, H., ,

Mailing Address 162 South Street

City
Minford

State
OH

Zip Code
45653

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 ▼

858.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209306

Amount of Each Receipt this Period

39.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILLIAMSON, CHARLES, H., ,

Mailing Address 162 South Street

City
Minford

State
OH

Zip Code
45653

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 ▼

897.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209937

Amount of Each Receipt this Period

39.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILLIAMSON, CHARLES, H., ,

Mailing Address 162 South Street

City
Minford

State
OH

Zip Code
45653

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 ▼

936.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210606

Amount of Each Receipt this Period

39.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

117.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1324 OF 1411

(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. WILLIAMSON, MINDA, , ,

Mailing Address 510 Oneida Street

City
JolietState
ILZip Code
60435FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

Transaction ID : SA11AI.208383

Amount of Each Receipt this Period

31.26

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILLOUGHBY, ROBERT, , ,Mailing Address 4802 Rolling Brook Lane
Apt. DCity
ColumbusState
OHZip Code
43232FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

THERAPUTIC PROGRAM TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210607

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILMORE, MICHAEL, , ,

Mailing Address 608 Hessel Boulevard

City
ChampaignState
ILZip Code
61820FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

762.79

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

Transaction ID : SA11AI.208384

Amount of Each Receipt this Period

76.28

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

116.04

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 1325 OF 1411

(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. WILSON, CORINNE, , ,

Mailing Address 1624 Daisy Tree

City
Ceres

State
CA

Zip Code
95307

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA CN 57

Occupation (for Individual)
BUSINESS AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.40

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 24 / 2018

Transaction ID : SA11AI.211255

Amount of Each Receipt this Period

16.70

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILSON, DONALD, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 09 / 2018

Transaction ID : SA11AI.207744

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILSON, DONALD, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 26 / 2018

Transaction ID : SA11AI.207988

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

36.70

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1326 OF 1411

(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. WILSON, JESSE, , ,

Mailing Address 1505 Washington Street

City
Evanston

State
IL

Zip Code
60202

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL RET CHPT 31

Occupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208400

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILSON, LYNN, A., ,

Mailing Address 2451 8th Avenue SW

City
Cedar Rapids

State
IA

Zip Code
52404

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2018

Transaction ID : SA11AI.211863

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILSON, LYNN, A., ,

Mailing Address 2451 8th Avenue SW

City
Cedar Rapids

State
IA

Zip Code
52404

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.211939

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

62.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1327 OF 1411

(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. WILSON, RANDALL, J., ,

Mailing Address 16 1/2 Elm Street

City
Warren

State
PA

Zip Code
16365

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 ▼

579.64

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207192

Amount of Each Receipt this Period

54.84

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILSON, SARAH, C., ,

Mailing Address 3609 Apollo Street SE

City
Lacey

State
WA

Zip Code
98503

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 25 / 2018

Transaction ID : SA11AI.207542

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILSON, SARAH, C., ,

Mailing Address 3609 Apollo Street SE

City
Lacey

State
WA

Zip Code
98503

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207745

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

114.84

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1328 OF 1411

(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. WILSON, SARAH, C., ,

Mailing Address 3609 Apollo Street SE

City
LaceyState
WAZip Code
98503FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	26	2018

Transaction ID : SA11AI.207989

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILSON, SHAWN, , ,

Mailing Address 445 Linden Street

City
ReadingState
PAZip Code
19604FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/STATE OF PAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.207193

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILSON, TROYCE, T., ,

Mailing Address 4663 W Sylvania Avenue

City
ToledoState
OHZip Code
43623FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CLAIMS EXAMINER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.209308

Amount of Each Receipt this Period

14.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

64.00

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 1329 OF 1411

(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. WILSON, TROYCE, T., ,

Mailing Address 4663 W Sylvania Avenue

City
Toledo

State
OH

Zip Code
43623

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
CLAIMS EXAMINER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

11 / 09 / 2018

Transaction ID : SA11AI.209939

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILSON, TROYCE, T., ,

Mailing Address 4663 W Sylvania Avenue

City
Toledo

State
OH

Zip Code
43623

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
CLAIMS EXAMINER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.00

Date of Receipt

11 / 23 / 2018

Transaction ID : SA11AI.210608

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WINDHAUSEN, ROBIN, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

10 / 25 / 2018

Transaction ID : SA11AI.207543

Amount of Each Receipt this Period

10.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

38.50

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1330 OF 1411

(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. WINDHAUSEN, ROBIN, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.50

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	9			2	0	1	8		

Transaction ID : SA11AI.207746

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WINDHAUSEN, ROBIN, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	6			2	0	1	8		

Transaction ID : SA11AI.207990

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WINDSOR, MONIQUE, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	9			2	0	1	8		

Transaction ID : SA11AI.207747

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

31.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1331 OF 1411

(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. WINDSOR, MONIQUE, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 26 / 2018

Transaction ID : SA11AI.207991

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WINGFIELD, CLAUDETTE, , ,

Mailing Address 5804 Folgate Court

City
Capitol Heights

State
MD

Zip Code
20743

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
STAFF ACCOUNTANT III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

823.70

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206515

Amount of Each Receipt this Period

42.73

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WINGFIELD, CLAUDETTE, , ,

Mailing Address 5804 Folgate Court

City
Capitol Heights

State
MD

Zip Code
20743

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
STAFF ACCOUNTANT III

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

866.43

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206901

Amount of Each Receipt this Period

42.73

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

95.46

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1332 OF 1411

(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. WINKFIELD, CARMEN, T., ,

Mailing Address 3022 Rollingwood Drive

City
ColumbusState
OHZip Code
43219FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ODJFS CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.209309

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WINKFIELD, CARMEN, T., ,

Mailing Address 3022 Rollingwood Drive

City
ColumbusState
OHZip Code
43219FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ODJFS CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209940

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WINKFIELD, CARMEN, T., ,

Mailing Address 3022 Rollingwood Drive

City
ColumbusState
OHZip Code
43219FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ODJFS CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210609

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

27.00

TOTAL This Period (last page this line number only)..... ►

X	11a		11b		11c		12		
	13		14		15		16		17

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

FEC Schedule A (Form 3X) Rev. 06/2016

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1334 OF 1411

(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. WITTER, SHIRLEY, A., ,

Mailing Address 3143 Halfway Road

City
Monroeville

State
OH

Zip Code
44847

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
LAUNDRY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209942

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WITTER, SHIRLEY, A., ,

Mailing Address 3143 Halfway Road

City
Monroeville

State
OH

Zip Code
44847

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
LAUNDRY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210611

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WOLF-MALONEY, KRISTIE, , ,

Mailing Address 4923C Haverford Road

City
Harrisburg

State
PA

Zip Code
17109

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 ▼

1221.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11AI.207194

Amount of Each Receipt this Period

106.30

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

124.30

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1335 OF 1411

(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. WOLFE, JENNIFER, L., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 700 Coshocton Avenue <table style="width: 100%; border: none;"> <tr> <td style="border: 1px solid black; width: 30%;">City Mount Vernon</td> <td style="border: 1px solid black; width: 10%;">State OH</td> <td style="border: 1px solid black; width: 60%;">Zip Code 43050</td> </tr> </table> FEC ID number of contributing federal political committee. C <table style="width: 100%; border: none;"> <tr> <td style="border: 1px solid black; width: 40%;">Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH</td> <td style="border: 1px solid black; width: 60%;">Occupation (for Individual) THERAPUTIC PROGRAM TECHNICIA</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 506.00			City Mount Vernon	State OH	Zip Code 43050	Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) THERAPUTIC PROGRAM TECHNICIA	Date of Receipt M M / D D / Y Y Y Y 10 / 26 / 2018 Transaction ID : SA11AI.209312 Amount of Each Receipt this Period 23.00 ☐ Memo Item
City Mount Vernon	State OH	Zip Code 43050						
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) THERAPUTIC PROGRAM TECHNICIA							
B. WOLFE, JENNIFER, L., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 700 Coshocton Avenue <table style="width: 100%; border: none;"> <tr> <td style="border: 1px solid black; width: 30%;">City Mount Vernon</td> <td style="border: 1px solid black; width: 10%;">State OH</td> <td style="border: 1px solid black; width: 60%;">Zip Code 43050</td> </tr> </table> FEC ID number of contributing federal political committee. C <table style="width: 100%; border: none;"> <tr> <td style="border: 1px solid black; width: 40%;">Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH</td> <td style="border: 1px solid black; width: 60%;">Occupation (for Individual) THERAPUTIC PROGRAM TECHNICIA</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 529.00			City Mount Vernon	State OH	Zip Code 43050	Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) THERAPUTIC PROGRAM TECHNICIA	Date of Receipt M M / D D / Y Y Y Y 11 / 09 / 2018 Transaction ID : SA11AI.209943 Amount of Each Receipt this Period 23.00 ☐ Memo Item
City Mount Vernon	State OH	Zip Code 43050						
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) THERAPUTIC PROGRAM TECHNICIA							
C. WOLFE, JENNIFER, L., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 700 Coshocton Avenue <table style="width: 100%; border: none;"> <tr> <td style="border: 1px solid black; width: 30%;">City Mount Vernon</td> <td style="border: 1px solid black; width: 10%;">State OH</td> <td style="border: 1px solid black; width: 60%;">Zip Code 43050</td> </tr> </table> FEC ID number of contributing federal political committee. C <table style="width: 100%; border: none;"> <tr> <td style="border: 1px solid black; width: 40%;">Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH</td> <td style="border: 1px solid black; width: 60%;">Occupation (for Individual) THERAPUTIC PROGRAM TECHNICIA</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) Aggregate Year-to-Date ▼ 552.00			City Mount Vernon	State OH	Zip Code 43050	Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) THERAPUTIC PROGRAM TECHNICIA	Date of Receipt M M / D D / Y Y Y Y 11 / 23 / 2018 Transaction ID : SA11AI.210612 Amount of Each Receipt this Period 23.00 ☐ Memo Item
City Mount Vernon	State OH	Zip Code 43050						
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH	Occupation (for Individual) THERAPUTIC PROGRAM TECHNICIA							
SUBTOTAL of Receipts This Page (optional)..... ▶		69.00						
TOTAL This Period (last page this line number only)..... ▶								

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1336 OF 1411

(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. WOLFE, JESSE, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.207748

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WOLFE, JESSE, , ,

Mailing Address 1212 Jefferson Street SE

City
OlympiaState
WAZip Code
98501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	26	2018

Transaction ID : SA11AI.207992

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WOLFORD, TIMOTHY, J., ,

Mailing Address 4298 Sestos Drive

City
ColumbusState
OHZip Code
43207FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.209313

Amount of Each Receipt this Period

14.50

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

34.50

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 1337 OF 1411

(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. WOLFORD, TIMOTHY, J., ,

Mailing Address 4298 Sestos Drive

City
Columbus

State
OH

Zip Code
43207

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 ▼

333.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209944

Amount of Each Receipt this Period

14.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WOLFORD, TIMOTHY, J., ,

Mailing Address 4298 Sestos Drive

City
Columbus

State
OH

Zip Code
43207

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 ▼

348.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210613

Amount of Each Receipt this Period

14.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WOLSTENHOLM, JOANNE, , ,

Mailing Address 191 N 11th Street

City
Grover Beach

State
CA

Zip Code
93433

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 3930

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211171

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

49.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1338 OF 1411

(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. WOMACK, DIANNE, L., ,

Mailing Address 1310 S. Central Road

City
Medical Lake

State
WA

Zip Code
99022

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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 Y
10 / 25 / 2018

Transaction ID : SA11AI.207546

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WOMACK, DIANNE, L., ,

Mailing Address 1310 S. Central Road

City
Medical Lake

State
WA

Zip Code
99022

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207749

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WOMACK, DIANNE, L., ,

Mailing Address 1310 S. Central Road

City
Medical Lake

State
WA

Zip Code
99022

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

393.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207993

Amount of Each Receipt this Period

19.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

57.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1339 OF 1411

(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. WONG, LYNN, , ,			Date of Receipt 11 / 01 / 2018 Transaction ID : SA11AI.211024		
Mailing Address 2752 Kaaha Street #304			Amount of Each Receipt this Period 20.00		
City Honolulu	State HI	Zip Code 96836-4754	☐ Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) AFSCME HI LOC 152		Occupation (for Individual) STAFF REPRESENTATIVE			
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00			
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WOOD, WILLIAM, T., ,			Date of Receipt 10 / 26 / 2018 Transaction ID : SA11AI.209314		
Mailing Address 6541 Blacks Road SW			Amount of Each Receipt this Period 15.00		
City Pataskala	State OH	Zip Code 43062	☐ Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH		Occupation (for Individual) STAFF REPRESENTATIVE			
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Aggregate Year-to-Date ▼ 330.00			
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WOOD, WILLIAM, T., ,			Date of Receipt 11 / 09 / 2018 Transaction ID : SA11AI.209945		
Mailing Address 6541 Blacks Road SW			Amount of Each Receipt this Period 15.00		
City Pataskala	State OH	Zip Code 43062	☐ Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH		Occupation (for Individual) STAFF REPRESENTATIVE			
Receipt For: ☐ Primary ☐ General ☐ Other (specify)		Aggregate Year-to-Date ▼ 345.00			
SUBTOTAL of Receipts This Page (optional).....▶			50.00		
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 1340 OF 1411

(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. **WOOD, WILLIAM, T., ,**

Mailing Address 6541 Blacks Road SW

City
Pataskala

State
OH

Zip Code
43062

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210614

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **WOODS, EMMA, , ,**

Mailing Address 9901 S Green Gate Lane

City
Medical Lake

State
WA

Zip Code
99022

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/COMM COLLEGE

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 25 / 2018

Transaction ID : SA11AI.207547

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **WOODS, EMMA, , ,**

Mailing Address 9901 S Green Gate Lane

City
Medical Lake

State
WA

Zip Code
99022

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/COMM COLLEGE

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207750

Amount of Each Receipt this Period

12.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

39.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1341 OF 1411

(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. WOODS, EMMA, , , Mailing Address 9901 S Green Gate Lane City Medical Lake State WA Zip Code 99022 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME WA CN 28/COMM COLLEGE Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 264.00			Date of Receipt 11 / 26 / 2018 Transaction ID : SA11AI.207994 Amount of Each Receipt this Period 12.00 ☐ Memo Item	
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WOODS, JAMIE, L., , Mailing Address 4671 Black Run Road City Chillicothe State OH Zip Code 45601 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 ▼ 204.00			Date of Receipt 11 / 23 / 2018 Transaction ID : SA11AI.210615 Amount of Each Receipt this Period 8.50 ☐ Memo Item	
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WOODS, NOREEN, B., , Mailing Address 52680 Avenida Velasco City La Quinta State CA Zip Code 92253 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME CA LOC 3930 Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: ☐ Primary ☐ General ☐ Other (specify) Aggregate Year-to-Date ▼ 241.66			Date of Receipt 11 / 07 / 2018 Transaction ID : SA11AI.211172 Amount of Each Receipt this Period 25.00 ☐ Memo Item	
SUBTOTAL of Receipts This Page (optional)..... ▶			45.50	
TOTAL This Period (last page this line number only)..... ▶				

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1342 OF 1411

(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. WOODSIDE, A DUFF, , ,Mailing Address 5051 Sandman Drive
Apt. 86City
Taylor MillState
KYZip Code
41015FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

612.92

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2018

Transaction ID : SA11AI.209316

Amount of Each Receipt this Period

27.86

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WOODSIDE, A DUFF, , ,Mailing Address 5051 Sandman Drive
Apt. 86City
Taylor MillState
KYZip Code
41015FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.78

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209947

Amount of Each Receipt this Period

27.86

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WOODSIDE, A DUFF, , ,Mailing Address 5051 Sandman Drive
Apt. 86City
Taylor MillState
KYZip Code
41015FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CUSTOMER SERVICES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

668.64

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210616

Amount of Each Receipt this Period

27.86

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

83.58

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1343 OF 1411

(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. WOODSON, DOUGLAS, N., ,

Mailing Address 108 Elgin
Apt. 1

City
Forest Park

State
IL

Zip Code
60130

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31

Occupation (for Individual)
ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

942.02

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208386

Amount of Each Receipt this Period

94.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WOODSON, TINA, J., ,

Mailing Address 811 Main Street

City
Mound City

State
IL

Zip Code
62963

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
SOCIAL SERVICE COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.82

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208387

Amount of Each Receipt this Period

31.26

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WOTRING, SEAN, C., ,

Mailing Address 4991 Apple Glen Trail

City
Grove City

State
OH

Zip Code
43123

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 ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209948

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

134.46

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1344 OF 1411

(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. WOTRING, SEAN, C., ,

Mailing Address 4991 Apple Glen Trail

City
Grove CityState
OHZip Code
43123FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210617

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WOTT, MICHELLE, K., ,

Mailing Address 512 McDonough Street

City
SanduskyState
OHZip Code
44870FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
STOREKEEPER I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2018

Transaction ID : SA11AI.209318

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WOTT, MICHELLE, K., ,

Mailing Address 512 McDonough Street

City
SanduskyState
OHZip Code
44870FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
STOREKEEPER I

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.209949

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

29.00

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 1345 OF 1411

(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. WOTT, MICHELLE, K., ,

Mailing Address 512 McDonough Street

City
Sandusky

State
OH

Zip Code
44870

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
STOREKEEPER I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210618

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WRAY, AMY, E., ,

Mailing Address 3611 Matthes Avenue

City
Sandusky

State
OH

Zip Code
44870

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
LICENSED PRACTICAL NURSE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209319

Amount of Each Receipt this Period

17.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WRAY, AMY, E., ,

Mailing Address 3611 Matthes Avenue

City
Sandusky

State
OH

Zip Code
44870

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
LICENSED PRACTICAL NURSE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

390.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209950

Amount of Each Receipt this Period

17.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1346 OF 1411

(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. WRAY, AMY, E., ,

Mailing Address 3611 Matthes Avenue

City
SanduskyState
OHZip Code
44870FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
LICENSED PRACTICAL NURSE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.00

Date of Receipt

M M	D D	Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210619

Amount of Each Receipt this Period

17.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WRIGHT, BERRA, LYNN, ,Mailing Address 2870 Pine Knoll Drive
Apt 300bCity
Auburn HillsState
MIZip Code
48326FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MI CN 25/LOCAL 1820Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.50

Date of Receipt

M M	D D	Y Y Y Y
10	18	2018

Transaction ID : SA11AI.211360

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WRIGHT, BERRA, LYNN, ,Mailing Address 2870 Pine Knoll Drive
Apt 300bCity
Auburn HillsState
MIZip Code
48326FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MI CN 25/LOCAL 1820Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.50

Date of Receipt

M M	D D	Y Y Y Y
11	01	2018

Transaction ID : SA11AI.211374

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

37.50

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 1347 OF 1411

(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. WRIGHT, BERRA, LYNN, ,

Mailing Address 2870 Pine Knoll Drive
Apt 300b

City
Auburn Hills

State
MI

Zip Code
48326

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MI CN 25/LOCAL 1820

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 16 / 2018

Transaction ID : SA11AI.211404

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WRIGHT, JESSICA, N., ,

Mailing Address 2513 22nd Street NE
Apt. #1

City
Washington

State
DC

Zip Code
20018

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
RETIREE FIELD ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

472.72

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206516

Amount of Each Receipt this Period

23.78

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WRIGHT, JESSICA, N., ,

Mailing Address 2513 22nd Street NE
Apt. #1

City
Washington

State
DC

Zip Code
20018

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
RETIREE FIELD ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

496.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206902

Amount of Each Receipt this Period

23.78

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

57.56

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1348 OF 1411

(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. **WRIGHT, PHILIP, M., ,**

Mailing Address 2599 Yorkview Road SW

City

New Philadelphia

State

OH

Zip Code

44663

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

AUTOMOTIVE TECHNICIAN

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209320

Amount of Each Receipt this Period

10.00

☐

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **WRIGHT, PHILIP, M., ,**

Mailing Address 2599 Yorkview Road SW

City

New Philadelphia

State

OH

Zip Code

44663

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

AUTOMOTIVE TECHNICIAN

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209951

Amount of Each Receipt this Period

10.00

☐

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **WRIGHT, PHILIP, M., ,**

Mailing Address 2599 Yorkview Road SW

City

New Philadelphia

State

OH

Zip Code

44663

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

AUTOMOTIVE TECHNICIAN

Receipt For:

☐
☐

Primary

☐

General

Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210620

Amount of Each Receipt this Period

10.00

☐

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

30.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1349 OF 1411

(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. WRIGHT, VANESSA, R., ,

Mailing Address P.O. Box 147

City
BidwellState
OHZip Code
45614FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
FINANCIAL ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

627.00

Date of Receipt

M M	D D	Y Y Y Y
10	26	2018

Transaction ID : SA11AI.209321

Amount of Each Receipt this Period

28.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WRIGHT, VANESSA, R., ,

Mailing Address P.O. Box 147

City
BidwellState
OHZip Code
45614FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
FINANCIAL ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

655.50

Date of Receipt

M M	D D	Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209952

Amount of Each Receipt this Period

28.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WRIGHT, VANESSA, R., ,

Mailing Address P.O. Box 147

City
BidwellState
OHZip Code
45614FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
FINANCIAL ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

684.00

Date of Receipt

M M	D D	Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210621

Amount of Each Receipt this Period

28.50

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

85.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1350 OF 1411

(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. WRIGHTSON, KEITH, T., ,

Mailing Address 5701 Granby Road

City
DerwoodState
MDZip Code
20855FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

HEALTH & SAFETY SPECIALIST II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

691.50

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206517

Amount of Each Receipt this Period

35.44

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WRIGHTSON, KEITH, T., ,

Mailing Address 5701 Granby Road

City
DerwoodState
MDZip Code
20855FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

HEALTH & SAFETY SPECIALIST II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

726.94

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	15	2018

Transaction ID : SA11AI.206903

Amount of Each Receipt this Period

35.44

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WUERFLEIN, GREGORY, J., ,

Mailing Address 211 County Road 5 NW

City
IsantiState
MNZip Code
55040FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	01	2018

Transaction ID : SA11AI.211799

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

90.88

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 1351 OF 1411

(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. WYATT, MARI, K., ,

Mailing Address 9344 54th Avenue S.

City
Seattle

State
WA

Zip Code
98118

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
10 / 25 / 2018

Transaction ID : SA11AI.207548

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WYATT, MARI, K., ,

Mailing Address 9344 54th Avenue S.

City
Seattle

State
WA

Zip Code
98118

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207751

Amount of Each Receipt this Period

10.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WYATT, MARI, K., ,

Mailing Address 9344 54th Avenue S.

City
Seattle

State
WA

Zip Code
98118

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF 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
11 / 26 / 2018

Transaction ID : SA11AI.207995

Amount of Each Receipt this Period

10.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

31.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1352 OF 1411

(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. WYCOFF, PATRICK, , ,

Mailing Address 8033 Excelsior Drive

City
Madison

State
WI

Zip Code
53717

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WI CN 32

Occupation (for Individual)
ASSISTANT DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 16 / 2018

Transaction ID : SA11AI.211454

Amount of Each Receipt this Period

72.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. XIONG, KADOU, , ,

Mailing Address 4855 Seminole Drive

City
San Diego

State
CA

Zip Code
92115

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 3930

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.14

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211173

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. YAMADA, JUSTIN, K., ,

Mailing Address 1426 North School Street

City
Honolulu

State
HI

Zip Code
96817

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI LOC 646

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

750.06

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.211296

Amount of Each Receipt this Period

83.34

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

176.84

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1353 OF 1411

(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. YAMASAKI, WAYNE, J., ,

Mailing Address 1185 Kaeleku Street

City
Honolulu

State
HI

Zip Code
96825-3007

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME HI RET CHPT 152

Occupation (for Individual)
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211053

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. YANA, JULIE, A., ,

Mailing Address 65 VFW Lane

City
Anna

State
IL

Zip Code
62906

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
ADMIN ASSISTANT I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.208388

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. YANCEY, GEORGE, E., ,

Mailing Address 1013 Tyler Street

City
Sandusky

State
OH

Zip Code
44870

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
FOOD SERVICE WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209322

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

93.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1354 OF 1411

(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. YANCEY, GEORGE, E., ,

Mailing Address 1013 Tyler Street

City
SanduskyState
OHZip Code
44870FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
FOOD SERVICE WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209953

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. YANCEY, GEORGE, E., ,

Mailing Address 1013 Tyler Street

City
SanduskyState
OHZip Code
44870FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
FOOD SERVICE WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210622

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. YANEZ, GETSEMANI, , ,Mailing Address 4907 Battery Lane
Unit 102City
BethesdaState
MDZip Code
20814FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
ASSIST. GRASSROOTS ADVOCACY S

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

514.54

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	31	2018

Transaction ID : SA11AI.206518

Amount of Each Receipt this Period

26.04

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

52.04

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1355 OF 1411

(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. YANEZ, GETSEMANI, , ,

Mailing Address 4907 Battery Lane
Unit 102

City
Bethesda

State
MD

Zip Code
20814

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ASSIST. GRASSROOTS ADVOCACY !

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.58

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206904

Amount of Each Receipt this Period

26.04

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. YANK, MELISSA, R., ,

Mailing Address 1290 Great Hunter Court

City

Grove City

State
OH

Zip Code
43123

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

SOFTWARE DEVELOPMENT TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209323

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. YANK, MELISSA, R., ,

Mailing Address 1290 Great Hunter Court

City

Grove City

State
OH

Zip Code
43123

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

SOFTWARE DEVELOPMENT TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209954

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

46.04

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1356 OF 1411

(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. YANK, MELISSA, R., ,

Mailing Address 1290 Great Hunter Court

City

Grove City

State

OH

Zip Code

43123

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

SOFTWARE DEVELOPMENT TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210623

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. YATES, STEVEN, , ,

Mailing Address 1212 Jefferson Street SE

City

Olympia

State

WA

Zip Code

98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 25 / 2018

Transaction ID : SA11AI.207549

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. YATES, STEVEN, , ,

Mailing Address 1212 Jefferson Street SE

City

Olympia

State

WA

Zip Code

98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

399.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.207752

Amount of Each Receipt this Period

19.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

48.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1357 OF 1411

(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. YATES, STEVEN, , ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

418.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2018

Transaction ID : SA11AI.207996

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. YEANEY, ROBERT, B., ,

Mailing Address 6800 N High Street

City
Worthington

State
OH

Zip Code
43085

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/DAYTON

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.42

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 23 / 2018

Transaction ID : SA11AI.210853

Amount of Each Receipt this Period

9.61

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. YEANEY, ROBERT, B., ,

Mailing Address 6800 N High Street

City
Worthington

State
OH

Zip Code
43085

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/DAYTON

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

221.03

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210854

Amount of Each Receipt this Period

9.61

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

38.22

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1358 OF 1411

(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. YEANEY, ROBERT, B., ,

Mailing Address 6800 N High Street

City
WorthingtonState
OHZip Code
43085FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/DAYTONOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.64

Date of Receipt

M M	D D	Y Y Y Y
11	20	2018

Transaction ID : SA11AI.210960

Amount of Each Receipt this Period

9.61

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. YEKALDO, SHARON, M., ,

Mailing Address 990 Charlton Street

City
Saint PaulState
MNZip Code
55118FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MNOccupation (for Individual)
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
11	01	2018

Transaction ID : SA11AI.211800

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. YINGER, CRYSTAL, , ,

Mailing Address 4031 Executive Park Drive

City
HarrisburgState
PAZip Code
17111FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

579.48

Date of Receipt

M M	D D	Y Y Y Y
11	08	2018

Transaction ID : SA11AI.207195

Amount of Each Receipt this Period

52.68

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

82.29

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1359 OF 1411

(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. YORKER, DAWN, T., ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 09 / 2018

Transaction ID : SA11AI.207753

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. YORKER, DAWN, T., ,

Mailing Address 1212 Jefferson Street SE

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)
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
11 / 26 / 2018

Transaction ID : SA11AI.207997

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. YOST, JODY, M., ,

Mailing Address 1533 Milan Road

City
Sandusky

State
OH

Zip Code
44870

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 ▼

286.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209324

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

33.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1360 OF 1411

(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. YOST, JODY, M., ,

Mailing Address 1533 Milan Road

City
Sandusky

State
OH

Zip Code
44870

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 ▼

299.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209955

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. YOST, JODY, M., ,

Mailing Address 1533 Milan Road

City
Sandusky

State
OH

Zip Code
44870

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 ▼

312.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210624

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. YOUNG, AMY, S., ,

Mailing Address 737 1st Street

City
West Union

State
OH

Zip Code
45693

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 ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2018

Transaction ID : SA11AI.209325

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

36.00

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 1361 OF 1411

(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. YOUNG, AMY, S., ,

Mailing Address 737 1st Street

City

West Union

State

OH

Zip Code

45693

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 ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2018

Transaction ID : SA11AI.209956

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. YOUNG, AMY, S., ,

Mailing Address 737 1st Street

City

West Union

State

OH

Zip Code

45693

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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210625

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. YOUNG, PAMELA, K., ,

Mailing Address 1374 Mailani Street

City

Hilo

State

HI

Zip Code

96720

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME HI LOC 152

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

229.35

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2018

Transaction ID : SA11AI.211025

Amount of Each Receipt this Period

20.85

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.85

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1362 OF 1411

(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. YUENGERT, DANIEL, J., ,

Mailing Address 8208 Venice Heights Drive NE

City
WarrenState
OHZip Code
44484FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M M	D D	Y Y Y Y
10	26	2018

Transaction ID : SA11AI.209326

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. YUENGERT, DANIEL, J., ,

Mailing Address 8208 Venice Heights Drive NE

City
WarrenState
OHZip Code
44484FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M	D D	Y Y Y Y
11	09	2018

Transaction ID : SA11AI.209957

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. YUENGERT, DANIEL, J., ,

Mailing Address 8208 Venice Heights Drive NE

City
WarrenState
OHZip Code
44484FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M	D D	Y Y Y Y
11	23	2018

Transaction ID : SA11AI.210626

Amount of Each Receipt this Period

13.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

39.00

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 1363 OF 1411

(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. ZAMBRANO, CHRISTINA, , ,

Mailing Address 1212 Jefferson Street SE

 City
 Olympia

 State
 WA

 Zip Code
 98501

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.207754

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ZAMBRANO, CHRISTINA, , ,

Mailing Address 1212 Jefferson Street SE

 City
 Olympia

 State
 WA

 Zip Code
 98501

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME WA CN 28/STATE OF WA

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.207998

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ZANDER, EVA, C., ,

Mailing Address 1155 Schaupp Court

 City
 Concord

 State
 CA

 Zip Code
 94520

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME CA CN 57

 Occupation (for Individual)
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.211256

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1364 OF 1411

(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. ZAVALA, HERMELINDA, , ,

Mailing Address 1057 Pitzer Road

City
Heber

State
CA

Zip Code
92249

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 3930

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.94

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 07 / 2018

Transaction ID : SA11AI.211174

Amount of Each Receipt this Period

41.66

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ZAVODNY, DON, , ,

Mailing Address 9801 West O Street

City
Lincoln

State
NE

Zip Code
68528

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.02

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.206519

Amount of Each Receipt this Period

56.76

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ZAVODNY, DON, , ,

Mailing Address 9801 West O Street

City
Lincoln

State
NE

Zip Code
68528

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'L

Occupation (for Individual)
AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1209.78

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2018

Transaction ID : SA11AI.206905

Amount of Each Receipt this Period

56.76

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

155.18

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1365 OF 1411

(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. ZEIGLER, JOHN, W., ,

Mailing Address 582 Athens Street

City
Columbus

State
OH

Zip Code
43204

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
JUVENILE CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 23 / 2018

Transaction ID : SA11AI.210627

Amount of Each Receipt this Period

8.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ZIDAN, SUHAIL, S., ,

Mailing Address 390 Worthington Road

City
Westerville

State
OH

Zip Code
43082

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11AI.210628

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ZIMMER, CLIFF, J., , II

Mailing Address 1742 Stevens Ave

City
Cincinnati

State
OH

Zip Code
45231

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8/METROHEALTH

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11AI.210961

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

58.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1366 OF 1411

(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. ZIMMER, NICHOLAS, P., ,

Mailing Address 12631 Wisteria Court

City

Palos Park

State

IL

Zip Code

60464

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

LOTTERY REGIONAL COORDINATOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

437.64

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2018			

Transaction ID : SA11AI.208389

Amount of Each Receipt this Period

41.68

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ZIMMERMAN, LEE, R., ,

Mailing Address 251 Deerfield Drive

City

Duncansville

State

PA

Zip Code

16635

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2018			

Transaction ID : SA11AI.207196

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ZIMMERMAN, MINDY, M., ,

Mailing Address 226 S Hunt Road

City

Carbondale

State

IL

Zip Code

62902

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

MENTAL HEALTH TECH I

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

441.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2018			

Transaction ID : SA11AI.208390

Amount of Each Receipt this Period

42.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

103.68

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1367 OF 1411

(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. ZINN, JENNIFER, , ,

Mailing Address 390 Worthington Road

City
WestervilleState
OHZip Code
43082FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2018

Transaction ID : SA11AI.210629

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ZURFACE, DONALD, L., ,

Mailing Address 4663 Robinson Road SE

City
Wshngtn Ct HsState
OHZip Code
43160FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
FINANCIAL ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : SA11AI.209959

Amount of Each Receipt this Period

9.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ZURFACE, DONALD, L., ,

Mailing Address 4663 Robinson Road SE

City
Wshngtn Ct HsState
OHZip Code
43160FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
FINANCIAL ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.210630

Amount of Each Receipt this Period

9.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

78.00

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 1368 OF 1411

(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. ZUVICH, MATTHEW, D., ,			Date of Receipt M M / D D / Y Y Y Y Y 10 / 18 / 2018 Transaction ID : SA11AI.208001	
Mailing Address 720 Mox-Chehalis Road			Amount of Each Receipt this Period 20.00	
City McCleary	State WA	Zip Code 98557	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) AFSCME WA CN 28		Occupation (for Individual) LOBBYIST		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Aggregate Year-to-Date ▼ 770.00		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. ZUVICH, MATTHEW, D., ,			Date of Receipt M M / D D / Y Y Y Y Y 11 / 14 / 2018 Transaction ID : SA11AI.207999	
Mailing Address 720 Mox-Chehalis Road			Amount of Each Receipt this Period 60.00	
City McCleary	State WA	Zip Code 98557	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) AFSCME WA CN 28		Occupation (for Individual) LOBBYIST		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Aggregate Year-to-Date ▼ 830.00		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. ZUVICH, MATTHEW, D., ,			Date of Receipt M M / D D / Y Y Y Y Y 11 / 15 / 2018 Transaction ID : SA11AI.208000	
Mailing Address 720 Mox-Chehalis Road			Amount of Each Receipt this Period 20.00	
City McCleary	State WA	Zip Code 98557	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) AFSCME WA CN 28		Occupation (for Individual) LOBBYIST		
Receipt For: ☐ Primary ☐ General ☐ Other (specify)		Aggregate Year-to-Date ▼ 850.00		
SUBTOTAL of Receipts This Page (optional).....▶			100.00	
TOTAL This Period (last page this line number only).....▶			111807.60	

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1369 OF 1411

(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 of Individual (Last, First, Middle Initial) or Full Organization Name
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (DC37PEOPLE)

Mailing Address 125 Barclay Street

City
New York

State
NY

Zip Code
10007

FEC ID number of contributing
federal political committee.

C C00149211

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

649795.83

Date of Receipt

10 / **24** / **2018**

Transaction ID : SA12.210761

Amount of Each Receipt this Period

12812.56

☐ Memo Item
Transfer

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

/ /

Amount of Each Receipt this Period

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

/ /

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

12812.56

TOTAL This Period (last page this line number only)..... ►

12812.56

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1370 OF 1411

(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. AMALGAMATED BANK

Mailing Address 275 Seventh Avenue

City
New York

State
NY

Zip Code
10001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3518484.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA17.210760

Amount of Each Receipt this Period

595.38

☐ Memo Item

Interest Income 10/31/2018

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

595.38

595.38

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1371 OF 1411

☒ 21b	☐ 22	☐ 23	☐ 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

Full Name (Last, First, Middle Initial)

A. AMALGAMATED BANK LOANS

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2018			

Mailing Address P.O. Box 68090

City
NewarkState
NJZip Code
07101-8087Purpose of Disbursement
Interest payment 11/2018

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.21074

Amount of Each Disbursement this Period

18229.16

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BART GROUP

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			06			2018			

Mailing Address 171 Main Street

City
Port WashingtonState
NYZip Code
11050Purpose of Disbursement
Merchant Service Charges

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.21074

Amount of Each Disbursement this Period

58.85

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BART GROUP

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			06			2018			

Mailing Address 171 Main Street

City
Port WashingtonState
NYZip Code
11050Purpose of Disbursement
Merchant Service Charges

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.21074

Amount of Each Disbursement this Period

61.54

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

18349.55

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1372 OF 1411

☒ 21b	☐ 22	☐ 23	☐ 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

Full Name (Last, First, Middle Initial)

A. FIS MERCHANT SERVICES-LL

Mailing Address P.O. Box 31129

City
TampaState
FLZip Code
33631-3129Purpose of Disbursement
Merchant Service Charges

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		1	4			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.21075

Amount of Each Disbursement this Period

317.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WEPAY, INC.Mailing Address 350 Convention Way
Suite 200City
Redwood CityState
CAZip Code
94063Purpose of Disbursement
Online Service Charges

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	8			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.20613

Amount of Each Disbursement this Period

18.14

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WEPAY, INC.Mailing Address 350 Convention Way
Suite 200City
Redwood CityState
CAZip Code
94063Purpose of Disbursement
Online Service Charges

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	9			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.20613

Amount of Each Disbursement this Period

6.67

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

341.91

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 1373 OF 1411

☒ 21b	☐ 22	☐ 23	☐ 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

Full Name (Last, First, Middle Initial)

A. WEPAY, INC.

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	2			2	0	1	8		

Mailing Address 350 Convention Way
Suite 200City
Redwood CityState
CAZip Code
94063Purpose of Disbursement
Online Service Charges

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.20614

Amount of Each Disbursement this Period

6.09

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WEPAY, INC.

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	3			2	0	1	8		

Mailing Address 350 Convention Way
Suite 200City
Redwood CityState
CAZip Code
94063Purpose of Disbursement
Online Service Charges

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.20614

Amount of Each Disbursement this Period

2.88

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WEPAY, INC.

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	4			2	0	1	8		

Mailing Address 350 Convention Way
Suite 200City
Redwood CityState
CAZip Code
94063Purpose of Disbursement
Online Service Charges

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.20614

Amount of Each Disbursement this Period

8.35

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

17.32

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1374 OF 1411

☒ 21b	☐ 22	☐ 23	☐ 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

Full Name (Last, First, Middle Initial)

A. WEPAY, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2018

Mailing Address 350 Convention Way
Suite 200City
Redwood CityState
CAZip Code
94063Purpose of Disbursement
Online Service Charges

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.20614

Amount of Each Disbursement this Period

2.56

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WEPAY, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2018

Mailing Address 350 Convention Way
Suite 200City
Redwood CityState
CAZip Code
94063Purpose of Disbursement
Online Service Charges

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.20614

Amount of Each Disbursement this Period

6.96

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WEPAY, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2018

Mailing Address 350 Convention Way
Suite 200City
Redwood CityState
CAZip Code
94063Purpose of Disbursement
Online Service Charges

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.20614

Amount of Each Disbursement this Period

5.50

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15.02

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 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

Full Name (Last, First, Middle Initial)

A. WEPAY, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2018

Mailing Address 350 Convention Way
Suite 200City
Redwood CityState
CAZip Code
94063Purpose of Disbursement
Online Service Charges

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.20614

Amount of Each Disbursement this Period

9.17

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WEPAY, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2018

Mailing Address 350 Convention Way
Suite 200City
Redwood CityState
CAZip Code
94063Purpose of Disbursement
Online Service Charges

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.20614

Amount of Each Disbursement this Period

14.06

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WEPAY, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2018

Mailing Address 350 Convention Way
Suite 200City
Redwood CityState
CAZip Code
94063Purpose of Disbursement
Online Service Charges

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.21063

Amount of Each Disbursement this Period

20.99

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

44.22

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 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

Full Name (Last, First, Middle Initial)

A. WEPAY, INC.

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	5			2	0	1	8		

Mailing Address 350 Convention Way
Suite 200City
Redwood CityState
CAZip Code
94063Purpose of Disbursement
Online Service Charges

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.21063

Amount of Each Disbursement this Period

99.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WEPAY, INC.

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	6			2	0	1	8		

Mailing Address 350 Convention Way
Suite 200City
Redwood CityState
CAZip Code
94063Purpose of Disbursement
Online Service Charges

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.21063

Amount of Each Disbursement this Period

2.46

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WEPAY, INC.

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	7			2	0	1	8		

Mailing Address 350 Convention Way
Suite 200City
Redwood CityState
CAZip Code
94063Purpose of Disbursement
Online Service Charges

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.21064

Amount of Each Disbursement this Period

2.75

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

105.16

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 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

Full Name (Last, First, Middle Initial)

A. WEPAY, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2018

Mailing Address 350 Convention Way
Suite 200City
Redwood CityState
CAZip Code
94063Purpose of Disbursement
Online Service Charges

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.21064

Amount of Each Disbursement this Period

0.62

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WEPAY, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		09		2018

Mailing Address 350 Convention Way
Suite 200City
Redwood CityState
CAZip Code
94063Purpose of Disbursement
Online Service Charges

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.21064

Amount of Each Disbursement this Period

5.82

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WEPAY, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		13		2018

Mailing Address 350 Convention Way
Suite 200City
Redwood CityState
CAZip Code
94063Purpose of Disbursement
Online Service Charges

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.21064

Amount of Each Disbursement this Period

9.51

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

15.95

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1378 OF 1411

☒ 21b	☐ 22	☐ 23	☐ 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

Full Name (Last, First, Middle Initial)

A. WEPAY, INC.

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		1	4			2	0	1	8		

Mailing Address 350 Convention Way
Suite 200City
Redwood CityState
CAZip Code
94063Purpose of Disbursement
Online Service Charges

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.21064

Amount of Each Disbursement this Period

13.12

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WEPAY, INC.

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		1	5			2	0	1	8		

Mailing Address 350 Convention Way
Suite 200City
Redwood CityState
CAZip Code
94063Purpose of Disbursement
Online Service Charges

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.21064

Amount of Each Disbursement this Period

0.49

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WEPAY, INC.

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		1	6			2	0	1	8		

Mailing Address 350 Convention Way
Suite 200City
Redwood CityState
CAZip Code
94063Purpose of Disbursement
Online Service Charges

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.21064

Amount of Each Disbursement this Period

3.77

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

17.38

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1379 OF 1411

☒ 21b	☐ 22	☐ 23	☐ 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

Full Name (Last, First, Middle Initial)

A. WEPAY, INC.

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		1	9			2	0	1	8		

Mailing Address 350 Convention Way
Suite 200City
Redwood CityState
CAZip Code
94063Purpose of Disbursement
Online Service Charges

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.21064

Amount of Each Disbursement this Period

32.19

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WEPAY, INC.

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	0			2	0	1	8		

Mailing Address 350 Convention Way
Suite 200City
Redwood CityState
CAZip Code
94063Purpose of Disbursement
Online Service Charges

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.21064

Amount of Each Disbursement this Period

2.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WEPAY, INC.

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	1			2	0	1	8		

Mailing Address 350 Convention Way
Suite 200City
Redwood CityState
CAZip Code
94063Purpose of Disbursement
Online Service Charges

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.21064

Amount of Each Disbursement this Period

3.56

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

38.50

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 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

Full Name (Last, First, Middle Initial)

A. WEPAY, INC.Mailing Address 350 Convention Way
Suite 200City
Redwood CityState
CAZip Code
94063Purpose of Disbursement
Online Service Charges

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	3			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.21065

Amount of Each Disbursement this Period

3.92

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WEPAY, INC.Mailing Address 350 Convention Way
Suite 200City
Redwood CityState
CAZip Code
94063Purpose of Disbursement
Online Service Charges

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	6			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.21065

Amount of Each Disbursement this Period

23.28

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

27.20

TOTAL This Period (last page this line number only)..... ►

18972.21

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1381 OF 1411

☐ 21b	☒ 22	☐ 23	☐ 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

Full Name (Last, First, Middle Initial)

A. AFSCME PEOPLE-Michigan Non Federal Account

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		26		2018

Mailing Address 1625 L Street NW

City
WashingtonState
DCZip Code
20036Purpose of Disbursement
Trf non-fed acct to non-fed activity

008

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C Transaction ID : SB22.210769

Amount of Each Disbursement this Period

168834.26

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AFSCME PEOPLE-Non Federal Account

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		18		2018

Mailing Address 1625 L Street NW

City
WashingtonState
DCZip Code
20036Purpose of Disbursement
Trf non-fed acct to non-fed activity

008

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C Transaction ID : SB22.210755

Amount of Each Disbursement this Period

472000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. AFSCME PEOPLE-Non Federal Account

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		25		2018

Mailing Address 1625 L Street NW

City
WashingtonState
DCZip Code
20036Purpose of Disbursement
Trf non-fed acct to non-fed activity

008

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C Transaction ID : SB22.210756

Amount of Each Disbursement this Period

117000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

757834.26

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1382 OF 1411

☐ 21b	☒ 22	☐ 23	☐ 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

Full Name (Last, First, Middle Initial)

A. AFSCME PEOPLE-Non Federal Account

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				31				2018					

Mailing Address 1625 L Street NW

City
WashingtonState
DCZip Code
20036Purpose of Disbursement
Trf non-fed acct to non-fed activity

008

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB22.210757

Amount of Each Disbursement this Period

83000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AFSCME PEOPLE-Non Federal Account

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				07				2018					

Mailing Address 1625 L Street NW

City
WashingtonState
DCZip Code
20036Purpose of Disbursement
Trf non-fed acct to non-fed activity

008

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB22.210758

Amount of Each Disbursement this Period

3200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. AFSCME PEOPLE-Non Federal Account

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				19				2018					

Mailing Address 1625 L Street NW

City
WashingtonState
DCZip Code
20036Purpose of Disbursement
Trf non-fed acct to non-fed activity

008

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB22.210759

Amount of Each Disbursement this Period

41700.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

127900.00

TOTAL This Period (last page this line number only)..... ►

885734.26

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 21b	☐ 22	☒ 23	☐ 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

Full Name (Last, First, Middle Initial)

A. ADAM SMITH FOR CONGRESS COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		25		2018

Mailing Address P.O. Box 578

City
RentonState
WAZip Code
98057Purpose of Disbursement
Contribution

011

Candidate Name

SMITH, D ADAM, , ,Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: WA District: 09

FEC Identification Number

C C00304709**Transaction ID : SB23.210685**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ALYSE FOR ALASKA

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		18		2018

Mailing Address P.O. Box 90020

City
AnchorageState
AKZip Code
99509Purpose of Disbursement
Contribution

011

Candidate Name

GALVIN, ALYSE, , ,Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: AK District: 00

FEC Identification Number

C C00665711**Transaction ID : SB23.210652**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. AMMAR CAMPA FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		18		2018

Mailing Address P.O. Box 610

City
JamulState
CAZip Code
91935Purpose of Disbursement
Contribution

011

Candidate Name

CAMPA-NAJJAR, AMMAR, , ,Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 50

FEC Identification Number

C C00635888**Transaction ID : SB23.210658**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

15000.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 21b	☐ 22	☒ 23	☐ 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

Full Name (Last, First, Middle Initial)

A. BRIAN HIGGINS FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		18		2018

Mailing Address P.O. Box 28

City
BuffaloState
NYZip Code
14220Purpose of Disbursement
Contribution

011

Candidate Name

HIGGINS, BRIAN, , ,Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: NY

District: 26

FEC Identification Number

C C00401034**Transaction ID : SB23.210662**

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CISNEROS FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2018

Mailing Address P.O. Box 40

City
PlacentiaState
CAZip Code
92871Purpose of Disbursement
Contribution - void check from prior report

011

Candidate Name

CISNEROS, GILBERT, , ,Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: CA

District: 39

FEC Identification Number

C C00650648**Transaction ID : SB23.210697**

Amount of Each Disbursement this Period

- 5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CLEAVER FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		18		2018

Mailing Address 4801 Main Street
Suite 1000City
Kansas CityState
MOZip Code
64112Purpose of Disbursement
Contribution

011

Candidate Name

CLEAVER, EMANUEL II, , ,Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: MO

District: 05

FEC Identification Number

C C00395848**Transaction ID : SB23.210663**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

- 1000.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 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

Full Name (Last, First, Middle Initial)

A. COMMITTEE TO ELECT TEDRA COBB

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2018			

Mailing Address P.O. Box 713

City
CantonState
NYZip Code
13617Purpose of Disbursement
Contribution

011

Candidate Name

COBB, TEDRA LYNNE MS., , ,Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: NY

District: 21

FEC Identification Number

C

C00649061

Transaction ID : SB23.210686

Amount of Each Disbursement this Period

5000.00

☐

Memo Item

Full Name (Last, First, Middle Initial)

B. ELECT DEMOCRATIC WOMEN

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			18			2018			

Mailing Address 918 Pennsylvania Avenue SE

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☐ General
☒ Other (specify) PAC

State:

District:

FEC Identification Number

C

C00685297

Transaction ID : SB23.210703

Amount of Each Disbursement this Period

5000.00

☐

Memo Item

Full Name (Last, First, Middle Initial)

C. FRIENDS OF RAJA FOR CONGRESS

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			18			2018			

Mailing Address P.O. Box 681202

City
SchaumburgState
ILZip Code
60168Purpose of Disbursement
Contribution

011

Candidate Name

KRISHNAMOORTHY, S. RAJA, , ,Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: IL

District: 08

FEC Identification Number

C

C00575092

Transaction ID : SB23.210664

Amount of Each Disbursement this Period

1500.00

☐

Memo Item

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 PageFOR LINE NUMBER:
(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

Full Name (Last, First, Middle Initial)

A. HIRAL FOR CONGRESS

Mailing Address P.O. Box 8570

City
PhoenixState
AZZip Code
85066Purpose of Disbursement
Contribution

011

Candidate Name

TIPIRNENI, HIRAL VYAS, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: AZ

District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				25				2018					

FEC Identification Number

C C00649897**Transaction ID : SB23.210681**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. JEFFRIES FOR CONGRESSMailing Address 3430 Connecticut Avenue NW
#11704City
WashingtonState
DCZip Code
20008Purpose of Disbursement
Contribution - void check from prior report

011

Candidate Name

JEFFRIES, HAKEEM, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: NY

District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				25				2018					

FEC Identification Number

C C00503052**Transaction ID : SB23.210690**

Amount of Each Disbursement this Period

- 2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JEFFRIES FOR CONGRESSMailing Address 3430 Connecticut Avenue NW
#11704City
WashingtonState
DCZip Code
20008Purpose of Disbursement
Contribution

011

Candidate Name

JEFFRIES, HAKEEM, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: NY

District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				26				2018					

FEC Identification Number

C C00503052**Transaction ID : SB23.210691**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

5000.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 21b	☐ 22	☒ 23	☐ 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

Full Name (Last, First, Middle Initial)

A. JESSICA MORSE FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		18		2018

Mailing Address 1079 Sunrise Avenue
Suite B275City
RosevilleState
CAZip Code
95661Purpose of Disbursement
Contribution

011

Candidate Name

MORSE, JESSICA, , ,Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: CA

District: 04

FEC Identification Number

C C00650408**Transaction ID : SB23.210665**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. JOE CUNNINGHAM FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		02		2018

Mailing Address P.O. Box 21012

City
CharlestonState
SCZip Code
29413Purpose of Disbursement
Contribution - void check from prior report

011

Candidate Name

CUNNINGHAM, JOE, , ,Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: SC

District: 01

FEC Identification Number

C C00650507**Transaction ID : SB23.210698**

Amount of Each Disbursement this Period

- 5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JOE DONNELLY FOR INDIANA

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		01		2018

Mailing Address 910 17th Street NW
Suite 925City
WashingtonState
DCZip Code
20006Purpose of Disbursement
Contribution

011

Candidate Name

DONNELLY, JOSEPH S, , ,Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: IN

District: 00

FEC Identification Number

C C00393652**Transaction ID : SB23.210712**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**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)
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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. JOE MORELLE FOR CONGRESS

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	8			2	0	1	8		

Mailing Address P.O. Box 90914

City
RochesterState
NYZip Code
14609Purpose of Disbursement
Contribution

011

Candidate Name

MORELLE, JOSEPH D, , ,Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☐ General
☒ Other (specify) ▼

State: NY

District: 25

Special-General

FEC Identification Number

C C00675108**Transaction ID : SB23.210668**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. JOSH GOTTHEIMER FOR CONGRESS

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	1			2	0	1	8		

Mailing Address P.O. Box 584

City
RidgewoodState
NJZip Code
07451Purpose of Disbursement
Contribution

011

Candidate Name

GOTTHEIMER, JOSH, , ,Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: NJ

District: 05

FEC Identification Number

C C00573949**Transaction ID : SB23.210699**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JOYCE BEATTY FOR CONGRESS

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	8			2	0	1	8		

Mailing Address 222 East Town Street
Suite 2WCity
ColumbusState
OHZip Code
43215Purpose of Disbursement
Contribution

011

Candidate Name

BEATTY, JOYCE, , ,Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH

District: 03

FEC Identification Number

C C00507368**Transaction ID : SB23.210669**

Amount of Each Disbursement this Period

1500.00

☐ Memo Item**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
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(check only one)

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☐ 21b	☐ 22	☒ 23	☐ 26	☐ 27
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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. KENTUCKY DEMOCRATIC PARTY

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		18		2018

Mailing Address P.O. Box 694

City
FrankfortState
KYZip Code
40602Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

PAC

FEC Identification Number

C C00011197

Transaction ID : SB23.210707

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KOPSER FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		18		2018

Mailing Address P.O. Box 701711

City
San AntonioState
TXZip Code
78270Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

KOPSER, JOSEPH, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify)

State: TX

District: 21

FEC Identification Number

C C00641191

Transaction ID : SB23.210670

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KULKARNI FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		25		2018

Mailing Address P.O. Box 842113

City
PearlandState
TXZip Code
77584Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

KULKARNI, SRI PRESTON, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: TX

District: 22

FEC Identification Number

C C00662874

Transaction ID : SB23.210692

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

15000.00

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
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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. LARSON FOR CONGRESS

Mailing Address P.O. Box 261172

City
HartfordState
CTZip Code
06126Purpose of Disbursement
Contribution

011

Candidate Name

LARSON, JOHN B, , ,Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: CT District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		18		2018

FEC Identification Number

C C00330142**Transaction ID : SB23.210674**

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. LUCILLE ROYBAL-ALLARD FOR CONGRESS

Mailing Address 6 E Street SE

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Candidate Name

ROYBAL-ALLARD, LUCILLE, , ,Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify)

State: CA District: 40

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		18		2018

FEC Identification Number

C C00259143**Transaction ID : SB23.210675**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. M-PACMailing Address 119 1st Avenue S
Suite 320City
SeattleState
WAZip Code
98104Purpose of Disbursement
Contribution

011

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☐ General
☒ Other (specify) ▼

State: District: PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		18		2018

FEC Identification Number

C C00365270**Transaction ID : SB23.210709**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**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)
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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. MALONEY FOR CONGRESS

Mailing Address 49 East 92nd Street

City
New YorkState
NYZip Code
10128Purpose of Disbursement
Contribution - void check from prior report

011

Category/
Type

Candidate Name

MALONEY, CAROLYN B, , ,Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2018
☐ Primary ☒ General
☐ Other (specify) ▼

State: NY District: 12

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	8		

FEC Identification Number

C C00273169**Transaction ID : SB23.210695**

Amount of Each Disbursement this Period

- 2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MALONEY FOR CONGRESS

Mailing Address 49 East 92nd Street

City
New YorkState
NYZip Code
10128Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

MALONEY, CAROLYN B, , ,Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2018
☐ Primary ☒ General
☐ Other (specify) ▼

State: NY District: 12

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	8		

FEC Identification Number

C C00273169**Transaction ID : SB23.210696**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MCCOLLUM FOR CONGRESS

Mailing Address P.O. Box 14131

City
Saint PaulState
MNZip Code
55114Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

MCCOLLUM, BETTY, , ,Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2018
☐ Primary ☒ General
☐ Other (specify) ▼

State: MN District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	8			2	0	1	8		

FEC Identification Number

C C00354688**Transaction ID : SB23.210676**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

2000.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse 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

Full Name (Last, First, Middle Initial)

A. MENENDEZ FOR SENATE

Mailing Address P.O. Box 32248

City
NewarkState
NJZip Code
07102Purpose of Disbursement
Contribution - void check from prior report

011

Category/
Type

Candidate Name

MENENDEZ, ROBERT, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2018
☐ Primary ☒ General
☐ Other (specify) ▼

State: NJ District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	1			2	0	1	8		

FEC Identification Number

C C00264564**Transaction ID : SB23.210713**

Amount of Each Disbursement this Period

- 5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MENENDEZ FOR SENATE

Mailing Address P.O. Box 32248

City
NewarkState
NJZip Code
07102Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

MENENDEZ, ROBERT, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2018
☐ Primary ☒ General
☐ Other (specify)

State: NJ District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	2			2	0	1	8		

FEC Identification Number

C C00264564**Transaction ID : SB23.210714**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MIKE ESPY FOR SENATE CAMPAIGN COMMITTEE

Mailing Address P.O. Box 14072

City
JacksonState
MSZip Code
39236Purpose of Disbursement
Contribution - General 2018

011

Category/
Type

Candidate Name

ESPY, ALPHONSO MICHAEL, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2018
☐ Primary ☐ General
☒ Other (specify) ▼

State: MS District: 00

Runoff

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			1	9			2	0	1	8		

FEC Identification Number

C C00675884**Transaction ID : SB23.210715**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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☐ 21b	☐ 22	☒ 23	☐ 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

Full Name (Last, First, Middle Initial)

A. MIKE ESPY VICTORY FUNDMailing Address 600 Pennsylvania Avenue SE
#15845City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☐ General
☒ Other (specify) ▼

PAC

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	0			2	0	1	8		

FEC Identification Number

C C00690172

Transaction ID : SB23.210710

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. NATE MCMURRAY FOR CONGRESS

Mailing Address P.O. Box 161

City
LewistonState
NYZip Code
14092Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

MCMURRAY, NATHAN DOUGLAS, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify)

State: NY

District: 27

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	8		

FEC Identification Number

C C00666453

Transaction ID : SB23.210682

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. NEVADA DEMOCRATIC PARTY

Mailing Address 409 Horn Street

City
Las VegasState
NVZip Code
89107Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☐ General
☒ Other (specify) ▼

PAC

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	8			2	0	1	8		

FEC Identification Number

C C00208991

Transaction ID : SB23.210708

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

15000.00

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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☐ 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

Full Name (Last, First, Middle Initial)

A. PINEAPPLE PAC

Mailing Address 709A 8th Street SE

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

PAC

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				18				2018					

FEC Identification Number

C

Transaction ID : SB23.210705

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SCHOLTEN4IOWA CAMPAIGN COMMITTEE

Mailing Address P.O. Box 3531

City
Sioux CityState
IAZip Code
51102Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

SCHOLTEN, JAMES D., , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify)

State: IA

District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				02				2018					

FEC Identification Number

C

C00650622

Transaction ID : SB23.210700

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TODD LITTON FOR CONGRESS

Mailing Address P.O. Box 980874

City
HoustonState
TXZip Code
77098Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

LITTON, TODD CATLETT, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: TX

District: 02

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				18				2018					

FEC Identification Number

C

C00639526

Transaction ID : SB23.210677

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

15000.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(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

Full Name (Last, First, Middle Initial)

A. TONY CARDENAS FOR CONGRESS

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				18				2018					

Mailing Address 249 E. Ocean Blvd.
Suite 685City
Long BeachState
CAZip Code
90802Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

CARDENAS, TONY, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: CA

District: 29

FEC Identification Number

C C00498873**Transaction ID : SB23.210680**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

2500.00

TOTAL This Period (last page this line number only)..... ►

104500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 21b	☐ 22	☐ 23	☐ 26	☐ 27
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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. COTE, EDWARD, S., ,

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y
1	1		1	9		2	0	1	8		

Mailing Address 4608 NW Olive Street

City
VancouverState
WAZip Code
98663Purpose of Disbursement
Erroneous Deduction

010

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB28A.21075

Amount of Each Disbursement this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

30.00

TOTAL This Period (last page this line number only)..... ►

30.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. AFSCME INTERNATIONAL

Mailing Address 1625 L Street NW

City
WashingtonState
DCZip Code
20036Purpose of Disbursement
Nonfederal -IA/In-kind/F.Hubbell/Governor

011

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☐ General
☒ Other (specify) ▼

GOVERNOR

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		1	5			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB29.211801

Amount of Each Disbursement this Period

21164.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AFSCME TEXAS CORRECTIONAL OFFICERS PACMailing Address 1314 10th Street
Suite 230City
HuntsvilleState
TXZip Code
77320Purpose of Disbursement
Nonfederal contribution

011

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☐ General
☒ Other (specify)

STATE PAC

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		1	9			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB29.210729

Amount of Each Disbursement this Period

98000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ANGELA ALSOBROOKS FOR COUNTY EXECUTIVEMailing Address 17 W Courtland Street
Suite 120City
Bel AirState
MDZip Code
21014Purpose of Disbursement
Nonfederal contribution

011

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☐ General
☒ Other (specify) ▼

COUNTY EXEC

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB29.210720

Amount of Each Disbursement this Period

3000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

122164.00

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
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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. CERILLION N4 PARTNERS

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	8		

Mailing Address 500 Union Street
Suite 909City
SeattleState
WAZip Code
98101Purpose of Disbursement
Nonfederal - Mailer/Support/F.Hubbell/Governor/IA

006

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☐ General
☒ Other (specify) ▼

GOVERNOR

State: District:

FEC Identification Number

C**Transaction ID : SB29.210745**

Amount of Each Disbursement this Period

6223.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CERILLION N4 PARTNERS

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	8		

Mailing Address 500 Union Street
Suite 909City
SeattleState
WAZip Code
98101Purpose of Disbursement
Nonfederal - Mailer/Support/K. Reynolds/Governor/IA

006

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☐ General
☒ Other (specify) ▼

GOVERNOR

State: District:

FEC Identification Number

C**Transaction ID : SB29.210746**

Amount of Each Disbursement this Period

6223.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CERILLION N4 PARTNERS

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	1			2	0	1	8		

Mailing Address 500 Union Street
Suite 909City
SeattleState
WAZip Code
98101Purpose of Disbursement
Nonfederal - Mailer/Support/F.Hubbell/Governor/IA

006

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☐ General
☒ Other (specify) ▼

GOVERNOR

State: District:

FEC Identification Number

C**Transaction ID : SB29.210744**

Amount of Each Disbursement this Period

11851.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

24297.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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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

Full Name (Last, First, Middle Initial)

A. CERILLION N4 PARTNERSMailing Address 500 Union Street
Suite 909City
SeattleState
WAZip Code
98101Purpose of Disbursement
Nonfederal - Mailer/Support/F.Hubbell/Governor/IA

006

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☐ General
☒ Other (specify) ▼

GOVERNOR

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	1			2	0	1	8		

FEC Identification Number

C Transaction ID : SB29.210747

Amount of Each Disbursement this Period

8221.37

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FRIENDS OF JOHNNY OLSZWESKIMailing Address 1215 E Fort Avenue
Suite 303City
BaltimoreState
MDZip Code
21230Purpose of Disbursement
Nonfederal contribution

011

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☐ General
☒ Other (specify) ▼

COUNTY EXEC

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	8		

FEC Identification Number

C Transaction ID : SB29.210724

Amount of Each Disbursement this Period

4000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FRIENDS OF STUART PITTMAN

Mailing Address 440 Dodon Road

City
DavidsonvilleState
MDZip Code
21035Purpose of Disbursement
Nonfederal contribution

011

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☐ General
☒ Other (specify) ▼

COUNTY EXEC

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	8		

FEC Identification Number

C Transaction ID : SB29.210726

Amount of Each Disbursement this Period

1500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

13721.37

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**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

Full Name (Last, First, Middle Initial)

A. HOPKINS + SACHS, INC.

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	7			2	0	1	8		

Mailing Address 600 North 36th Street
Suite 428City
SeattleState
WAZip Code
98103Purpose of Disbursement
Nonfederal - Mailer/Support/F.Hubbell/Governor/IA

006

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☐ General
☒ Other (specify) ▼

GOVERNOR

State: District:

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.210740

Amount of Each Disbursement this Period

1359.12

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. JAN GARDNER FOR FREDERICK COUNTY

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	8		

Mailing Address P.O. Box 3183

City
FrederickState
MDZip Code
21705Purpose of Disbursement
Nonfederal contribution

011

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☐ General
☒ Other (specify) ▼

COUNTY EXEC

State: District:

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.210718

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. NEVADA DEMOCRATIC PARTY

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	1			2	0	1	8		

Mailing Address 409 Horn Street

City
Las VegasState
NVZip Code
89107Purpose of Disbursement
Nonfederal contribution

011

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☐ General
☒ Other (specify) ▼

STATE PAC

State: District:

FEC Identification Number

C C00208991

Transaction ID : SB29.210728

Amount of Each Disbursement this Period

75000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

77859.12

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
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(check only one)

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☐ 21b	☐ 22	☐ 23	☐ 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

Full Name (Last, First, Middle Initial)

A. RONNIE BASTIN FOR MAYORMailing Address 5101 Tates Creek Center Drive
Suite 150 PMB 286City
LexingtonState
KYZip Code
40517Purpose of Disbursement
Nonfederal contribution

011

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☐ General
☒ Other (specify) ▼

MAYOR

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	8			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB29.210716

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. THE CALVIN BALL TEAMMailing Address 1215 E Fort Avenue
Suite 303City
BaltimoreState
MDZip Code
21230Purpose of Disbursement
Nonfederal contribution

011

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☐ General
☒ Other (specify)

COUNTY EXEC

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB29.210722

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WILDFIRE CONTACT, LLCMailing Address 290 Broadway
Suite 132City
MethuenState
MAZip Code
01844Purpose of Disbursement
Nonfederal - Mailer/Support/Richard Cordray/Governor/OH

006

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☐ General
☒ Other (specify) ▼

GOVERNOR

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB29.210737

Amount of Each Disbursement this Period

95682.99

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

98682.99

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1402 OF 1411

☐ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. WILDFIRE CONTACT, LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2018

Mailing Address 290 Broadway
Suite 132City
MethuenState
MAZip Code
01844Purpose of Disbursement
Nonfederal - Mailer/Support/R.Cordray/Governor/OH

006

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☐ General
☒ Other (specify) ▼

GOVERNOR

State: District:

FEC Identification Number

C

Transaction ID : SB29.210739

Amount of Each Disbursement this Period

271114.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

271114.20

607838.68

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 1403 OF 1411

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.205683

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**LOAN SOURCE** Full Name (Last, First, Middle Initial)
AMALGAMATED BANK☒ **N** ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 275 Seventh Avenue

City

New York

State

NY

ZIP Code

10001

Original Amount of Loan

3500000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

3500000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y Y Y
10 / 11 / 2018

Date Due

M M / D D / Y Y Y Y Y Y
06/30/2020

Interest Rate

6.25 % (apr)

Secured:

☒ Yes ☐ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

3500000.00

TOTALS This Period (last page in this line only)..... ►

3500000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 1404 OF 1411

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

CHAMBERS LOPEZ STRATEGIES LLC

Nature of Debt (Purpose):

Memo items on Schedule B, Line 24 (4186.03)
and (4186.04)

Mailing Address P.O. Box 5539

City
ArlingtonState
VAZip Code
22205

Outstanding Balance Beginning This Period

8372.07

Transaction ID : SD10.205701

Amount Incurred This Period

0.00

Payment This Period

8372.07

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

THREE POINT MEDIA, LLC

Nature of Debt (Purpose):

Memo item on Schedule B, Line 24

Mailing Address 290 Broadway
Suite 120City
MethuenState
MAZip Code
01844

Outstanding Balance Beginning This Period

2223.20

Transaction ID : SD10.206029

Amount Incurred This Period

0.00

Payment This Period

2223.20

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

WILDFIRE CONTACT, LLC

Nature of Debt (Purpose):

Memo items on Schedule B, Line 24
(31,894.33) and Line 29 (95,682.99)Mailing Address 290 Broadway
Suite 132City
MethuenState
MAZip Code
01844

Outstanding Balance Beginning This Period

127577.32

Transaction ID : SD10.205678

Amount Incurred This Period

0.00

Payment This Period

127577.32

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional)..... ►

0.00

2) TOTALS This Period (last page this line number only)..... ►

0.00

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1405 OF 1411
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E				FEC IDENTIFICATION NUMBER ▼ C C00011114	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on				M M M D D D Y Y Y Y Y Y	
Full Name of Payee CERILLION N4 PARTNERS			☐ Memo Item Date of Public Distribution/Dissemination M M M D D D Y Y Y Y Y Y		
Mailing Address 500 Union Street Suite 909			Amount 1290.82		
City Seattle	State WA	Zip Code 98101	Transaction ID : SE.206115 Date of Disbursement or Obligation M M M D D D Y Y Y Y Y Y		
Purpose of Expenditure Mailer		Category/ Type 006	M M M D D D Y Y Y Y Y Y		
Name of Federal Candidate: FINKENAUER, ABBY, , ,			☒ Support ☐ Oppose Office Sought: ☒ House ☐ President ☐ Senate District: <u>01</u> State: <u>IA</u>		
Calendar Year-To-Date Per Election for Office Sought 1290.82			Disbursement For: ☐ Primary ☒ General 2018 ☐ Other (specify) ▶		
Full Name of Payee CERILLION N4 PARTNERS			☐ Memo Item Date of Public Distribution/Dissemination M M M D D D Y Y Y Y Y Y		
Mailing Address 500 Union Street Suite 909			Amount 2863.40		
City Seattle	State WA	Zip Code 98101	Transaction ID : SE.206117 Date of Disbursement or Obligation M M M D D D Y Y Y Y Y Y		
Purpose of Expenditure Mailer		Category/ Type 006	M M M D D D Y Y Y Y Y Y		
Name of Federal Candidate: LOEBSACK, DAVID WAYNE, , ,			☒ Support ☐ Oppose Office Sought: ☒ House ☐ President ☐ Senate District: <u>02</u> State: <u>IA</u>		
Calendar Year-To-Date Per Election for Office Sought 2863.40			Disbursement For: ☐ Primary ☒ General 2018 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			4154.22		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
MCBRIDE, ELISSA, , , Signature		[Electronically Filed]		Date M M M D D D Y Y Y Y Y Y 12 06 2018	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1406 OF 1411
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E				FEC IDENTIFICATION NUMBER ▼ C C00011114	
Check if ☐ 24-hour report ☐ 48-hour report ☒ New report Amends report filed on				M M / D D / Y Y Y Y Y Y 10 / 24 / 2018	
Full Name of Payee ☐ Memo Item CERILLION N4 PARTNERS			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 24 / 2018		
Mailing Address 500 Union Street Suite 909			Amount 2070.41		
City Seattle		State WA	Zip Code 98101	Transaction ID : SE.206118 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 24 / 2018	
Purpose of Expenditure Mailer		Category/Type 006			
Name of Federal Candidate: AXNE, CINDY, , ,			☒ Support ☐ Oppose	Office Sought: ☒ House District: 03 ☐ President ☐ Senate State: IA	
Calendar Year-To-Date Per Election for Office Sought			2070.41	Disbursement For: ☐ Primary ☒ General 2018 ☐ Other (specify) ▶	
Full Name of Payee ☐ Memo Item CHAMBERS LOPEZ STRATEGIES LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 19 / 2018		
Mailing Address P.O. Box 5539			Amount 10985.07		
City Arlington		State VA	Zip Code 22205	Transaction ID : SE.204430 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 18 / 2018	
Purpose of Expenditure TV ad Production Cost '96 Percent'		Category/Type 004			
Name of Federal Candidate: HELLER, DEAN, , ,			☐ Support ☒ Oppose	Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought			1626343.93	Disbursement For: ☐ Primary ☒ General 2018 ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			▶	13055.48	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			▶	0.00	
(c) TOTAL Independent Expenditures			▶	13055.48	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
MCBRIDE, ELISSA, , , Signature			[Electronically Filed]	Date M M / D D / Y Y Y Y Y Y 12 / 06 / 2018	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1407 OF 1411
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E	FEC IDENTIFICATION NUMBER ▼ C C00011114
Check if ☐ 24-hour report ☐ 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee ☐ Memo Item CHAMBERS LOPEZ STRATEGIES LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 19 / 2018	
Mailing Address P.O. Box 5539			Amount 3661.69	
City Arlington	State VA	Zip Code 22205		
Purpose of Expenditure TV ad Production Cost '96 Percent'		Category/Type 004	Transaction ID : SE.204431 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 18 / 2018	
Name of Federal Candidate: ROSEN, JACKY, , ,			☒ Support ☐ Oppose Office Sought: ☐ House ☒ Senate District: 00 State: NV	
Calendar Year-To-Date Per Election for Office Sought 1630005.62			Disbursement For: ☐ Primary ☒ General 2018 ☐ Other (specify) ▶	

Full Name of Payee ☐ Memo Item CHAMBERS LOPEZ STRATEGIES LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 14 / 2018	
Mailing Address P.O. Box 5539			Amount 4186.03	
City Arlington	State VA	Zip Code 22205		
Purpose of Expenditure Radio ad Production Cost 'Birthday Alone'		Category/Type 004	Transaction ID : SE.210732 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 19 / 2018	
Name of Federal Candidate: HELLER, DEAN, , ,			☐ Support ☒ Oppose Office Sought: ☐ House ☒ Senate District: 00 State: NV	
Calendar Year-To-Date Per Election for Office Sought 1634191.65			Disbursement For: ☐ Primary ☒ General 2018 ☐ Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	7847.72
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

MCBRIDE, ELISSA, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1408 OF 1411
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E		FEC IDENTIFICATION NUMBER ▼ C C00011114
Check if ☐ 24-hour report ☐ 48-hour report ▶ New report Amends report filed on		M M / D D / Y Y Y Y Y Y / / / / /

Full Name of Payee ☐ Memo Item CHAMBERS LOPEZ STRATEGIES LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 14 / 2018	
Mailing Address P.O. Box 5539			Amount 4186.04	
City Arlington	State VA	Zip Code 22205	Transaction ID : SE.210733 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 19 / 2018	
Purpose of Expenditure Radio ad Production Cost 'Birthday Alone'		Category/ Type 004	Name of Federal Candidate: ☒ Support ☐ Oppose ROSEN, JACKY, , ,	
Calendar Year-To-Date Per Election for Office Sought		1638377.69	Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NV Disbursement For: ☐ Primary ☒ General 2018 ☐ Other (specify) ▶	

Full Name of Payee ☐ Memo Item CHAMBERS LOPEZ STRATEGIES LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 28 / 2018	
Mailing Address P.O. Box 5539			Amount 4168.53	
City Arlington	State VA	Zip Code 22205	Transaction ID : SE.206124 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 26 / 2018	
Purpose of Expenditure Radio ad Production Cost 'Vote Jacky'		Category/ Type 004	Name of Federal Candidate: ☐ Support ☒ Oppose HELLER, DEAN, , ,	
Calendar Year-To-Date Per Election for Office Sought		1642546.22	Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NV Disbursement For: ☐ Primary ☒ General 2018 ☐ Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	8354.57
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

MCBRIDE, ELISSA, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1409 OF 1411
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E				FEC IDENTIFICATION NUMBER ▼ C C00011114	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on				M M M D D D Y Y Y Y Y Y	
Full Name of Payee CHAMBERS LOPEZ STRATEGIES LLC			Date of Public Distribution/Dissemination M M M D D D Y Y Y Y Y Y		
Mailing Address P.O. Box 5539			Amount 4168.54		
City Arlington	State VA	Zip Code 22205	Transaction ID : SE.206125 Date of Disbursement or Obligation M M M D D D Y Y Y Y Y Y		
Purpose of Expenditure Radio ad Production Cost 'Vote Jacky'		Category/Type 004	M M M D D D Y Y Y Y Y Y		
Name of Federal Candidate: ROSEN, JACKY, , ,			☒ Support ☐ Oppose Office Sought: ☐ House ☒ Senate ☐ President ☐ Other (specify)		
Calendar Year-To-Date Per Election for Office Sought			1646714.76 Disbursement For: ☐ Primary ☒ General 2018 ☐ Other (specify)		
Full Name of Payee CHAMBERS LOPEZ STRATEGIES LLC			Date of Public Distribution/Dissemination M M M D D D Y Y Y Y Y Y		
Mailing Address P.O. Box 5539			Amount 9521.18		
City Arlington	State VA	Zip Code 22205	Transaction ID : SE.206126 Date of Disbursement or Obligation M M M D D D Y Y Y Y Y Y		
Purpose of Expenditure TV ad Production Cost 'Jacky'		Category/Type 004	M M M D D D Y Y Y Y Y Y		
Name of Federal Candidate: HELLER, DEAN, , ,			☐ Support ☒ Oppose Office Sought: ☐ House ☒ Senate ☐ President ☐ Other (specify)		
Calendar Year-To-Date Per Election for Office Sought			1656235.94 Disbursement For: ☐ Primary ☒ General 2018 ☐ Other (specify)		
(a) SUBTOTAL of Itemized Independent Expenditures			13689.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
MCBRIDE, ELISSA, , , Signature		[Electronically Filed]		Date M M M D D D Y Y Y Y Y Y	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1410 OF 1411
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E				FEC IDENTIFICATION NUMBER ▼ C C00011114	
Check if ☐ 24-hour report ☐ 48-hour report ▶ New report Amends report filed on				M M M D D D Y Y Y Y Y Y	
Full Name of Payee ☐ Memo Item CHAMBERS LOPEZ STRATEGIES LLC			Date of Public Distribution/Dissemination M M M D D D Y Y Y Y Y Y 10 28 2018		
Mailing Address P.O. Box 5539			Amount 9521.18		
City Arlington		State VA	Zip Code 22205	Transaction ID : SE.206127 Date of Disbursement or Obligation M M M D D D Y Y Y Y Y Y 10 29 2018	
Purpose of Expenditure TV ad Production Cost 'Jacky'			Category/ Type 004	Name of Federal Candidate: ROSEN, JACKY, , ,	
Name of Federal Candidate: ROSEN, JACKY, , ,			☒ Support ☐ Oppose	Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought			1665757.12	Disbursement For: ☐ Primary ☒ General 2018 ☐ Other (specify) ▶	
Full Name of Payee ☐ Memo Item HOPKINS + SACHS, INC.			Date of Public Distribution/Dissemination M M M D D D Y Y Y Y Y Y 10 31 2018		
Mailing Address 600 North 36th Street Suite 428			Amount 1359.13		
City Seattle		State WA	Zip Code 98103	Transaction ID : SE.206133 Date of Disbursement or Obligation M M M D D D Y Y Y Y Y Y 10 30 2018	
Purpose of Expenditure Mailer			Category/ Type 006	Name of Federal Candidate: SCHOLTEN, JAMES D., , ,	
Name of Federal Candidate: SCHOLTEN, JAMES D., , ,			☒ Support ☐ Oppose	Office Sought: ☒ House District: 04 ☐ President ☐ Senate State: IA	
Calendar Year-To-Date Per Election for Office Sought			1359.13	Disbursement For: ☐ Primary ☒ General 2018 ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			10880.31	(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
MCBRIDE, ELISSA, , , Signature			[Electronically Filed]	Date M M M D D D Y Y Y Y Y Y 12 06 2018	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1411 OF 1411
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E				FEC IDENTIFICATION NUMBER ▼ C C00011114	
Check if ☐ 24-hour report ☐ 48-hour report ▶ New report Amends report filed on				M M M D D D Y Y Y Y Y Y	
Full Name of Payee ☐ Memo Item THREE POINT MEDIA, LLC			Date of Public Distribution/Dissemination M M M D D D Y Y Y Y Y Y 10 16 2018		
Mailing Address 290 Broadway Suite 120			Amount 2223.20		
City Methuen	State MA	Zip Code 01844	Transaction ID : SE.210735 Date of Disbursement or Obligation M M M D D D Y Y Y Y Y Y 10 25 2018		
Purpose of Expenditure Radio ad Production Cost 'Cash'		Category/ Type 004	Name of Federal Candidate: ☐ Support TENNEY, CLAUDIA, , , ☒ Oppose		
Calendar Year-To-Date Per Election for Office Sought		172405.49	Office Sought: ☒ House District: 22 ☐ President ☐ Senate State: NY Disbursement For: ☐ Primary ☒ General 2018 ☐ Other (specify) ▶		
Full Name of Payee ☐ Memo Item WILDFIRE CONTACT, LLC			Date of Public Distribution/Dissemination M M M D D D Y Y Y Y Y Y 10 16 2018		
Mailing Address 290 Broadway Suite 132			Amount 31894.33		
City Methuen	State MA	Zip Code 01844	Transaction ID : SE.210736 Date of Disbursement or Obligation M M M D D D Y Y Y Y Y Y 10 26 2018		
Purpose of Expenditure Mailer		Category/ Type 006	Name of Federal Candidate: ☒ Support BROWN, SHERROD, , , ☐ Oppose		
Calendar Year-To-Date Per Election for Office Sought		31894.33	Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: OH Disbursement For: ☐ Primary ☒ General 2018 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			34117.53		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures			92099.55		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>MCBRIDE, ELISSA, , ,</u>		<u>[Electronically Filed]</u>		Date M M M D D D Y Y Y Y Y Y 12 06 2018	