

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

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

FOR LINE NUMBER: PAGE 387 OF 414

(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)

IUOE OPERATING ENGINEERS

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

A. WINCHESTER, ROBERT, , ,

Mailing Address P.O. BOX 1425

City

ALBRIGHTSVILLE

State

PA

Zip Code

19034

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

IUOE LOCAL 542

Occupation (for Individual)

OPERATOR

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

638.60

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2019

Transaction ID : SA11Al.135101

Amount of Each Receipt this Period

28.98

☐ Memo Item

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

B. WINCHESTER, ROBERT, , ,

Mailing Address P.O. BOX 1425

City

ALBRIGHTSVILLE

State

PA

Zip Code

19034

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

IUOE LOCAL 542

Occupation (for Individual)

OPERATOR

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

670.72

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2019

Transaction ID : SA11Al.135102

Amount of Each Receipt this Period

32.12

☐ Memo Item

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

C. WINDWEHR, IRA, , ,

Mailing Address 905 CATHE LANE

City

WARMINSTER

State

PA

Zip Code

19034

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

AMQUIP CRANE RENTAL LLC

Occupation (for Individual)

OPERATOR

Receipt For:

☐  
☐

Primary

General

Other (specify)

Aggregate Year-to-Date ▼

212.93

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2019

Transaction ID : SA11Al.135103

Amount of Each Receipt this Period

20.03

☐ Memo Item

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

81.13

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