

**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
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
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)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

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

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.

Type or Print Name of Treasurer LAURA REYES

Signature of Treasurer

LAURA REYES

[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 2 U.S.C. §437g.

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

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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 05 / 01 / 2014 To: M M / D D / Y Y Y Y Y 05 / 31 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2014		4770226.56
(b) Cash on Hand at Beginning of Reporting Period.....	5495958.13	
(c) Total Receipts (from Line 19)	578300.37	3614733.93
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	6074258.50	8384960.49
7. Total Disbursements (from Line 31)	294969.99	2605671.98
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	5779288.51	5779288.51
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

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
05 01 2014

To:

M M / D D / Y Y Y Y
05 31 2014

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).....

56920.86

176095.21

(ii) Unitemized

470896.21

3146239.26

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

527817.07

3322334.47

(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)

527817.07

3322334.47

12. Transfers From Affiliated/Other

Party Committees.....

49766.71

274636.98

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

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

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

14500.00

17. Other Federal Receipts

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

716.59

3262.48

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))**

578300.37

3614733.93

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

578300.37

3614733.93

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

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	553.99	9817.99
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	553.99	9817.99
22. Transfers to Affiliated/Other Party Committees.....	92100.00	913680.43
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	200250.00	651250.00
24. Independent Expenditures (use Schedule E)	0.00	312699.50
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	715264.61
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	66.00	959.45
(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)).....	66.00	959.45
29. Other Disbursements	2000.00	2000.00
30. Federal Election Activity (2 U.S.C. §431(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)) ..	294969.99	2605671.98
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	294969.99	2605671.98

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	527817.07	3322334.47
34. Total Contribution Refunds (from Line 28(d))	66.00	959.45
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	527751.07	3321375.02
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	553.99	9817.99
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	553.99	9817.99

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 OF 403

(check only one)

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

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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. JEFFREY S. ABBE

Mailing Address P.O. Box 486

City	State	Zip Code
Harold	KY	41635

FEC ID number of contributing federal political committee.

Name of Employer

AFSCME INT'L

Occupation

ORGANIZER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.47011

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

B. JEFFREY S. ABBE

Mailing Address P.O. Box 486

City	State	Zip Code
Harold	KY	41635

FEC ID number of contributing federal political committee.

Name of Employer

AFSCME INT'L

Occupation

ORGANIZER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.47437

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. KAREN ABBIATICI

Mailing Address 4602 W. Barlind

City	State	Zip Code
Pittsburgh	PA	15227

FEC ID number of contributing federal political committee.

Name of Employer

AFSCME PA CN 13

Occupation

SECRETARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.47248

Amount of Each Receipt this Period

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

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

716.49

796.10

292.50

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 403

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

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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. CANDACE M. ACORD

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

AFSCME IA CN 61/DOCS

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

05 / 22 / 2014

Transaction ID : SA11AI.48884

Amount of Each Receipt this Period

32.50

Full Name (Last, First, Middle Initial)

B. ALAN D. ACRI

Mailing Address 400 Hilltop Road

City

Strasburg

State

PA

Zip Code

17579

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13/LOCAL 1896

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

05 / 12 / 2014

Transaction ID : SA11AI.48622

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. DAVID ADAM

Mailing Address 468 Hudson Avenue

City

Newark

State

OH

Zip Code

43055

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.64

Date of Receipt

05 / 12 / 2014

Transaction ID : SA11AI.48026

Amount of Each Receipt this Period

34.96

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

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

107.46

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 403

(check only one)

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

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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. DAVID ADAM

Mailing Address 468 Hudson Avenue

City State Zip Code
Newark OH 43055

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 4

Occupation
ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.60

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.48078

Amount of Each Receipt this Period

34.96

Full Name (Last, First, Middle Initial)

B. DAVID ADAM

Mailing Address 468 Hudson Avenue

City State Zip Code
Newark OH 43055

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 4

Occupation
ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.56

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 29 / 2014

Transaction ID : SA11AI.48130

Amount of Each Receipt this Period

34.96

Full Name (Last, First, Middle Initial)

C. THORNTON P. ALBERG

Mailing Address 615 136th Street E

City State Zip Code
Tacoma WA 98445

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME WA CN 28/STATE OF WA

Occupation
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 09 / 2014

Transaction ID : SA11AI.48277

Amount of Each Receipt this Period

31.00

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

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

100.92

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

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

FOR LINE NUMBER: PAGE 10 OF 403
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. THORNTON P. ALBERG</p> <p>Mailing Address 615 136th Street E</p> <p>City Tacoma State WA Zip Code 98445</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 305.00</p>			<p>Date of Receipt 05 / 23 / 2014 Transaction ID : SA11AI.48309 </p> <p>Amount of Each Receipt this Period 31.00 </p>		
<p>Full Name (Last, First, Middle Initial) B. SHANA ALDERTON</p> <p>Mailing Address 710 Chippewa Square</p> <p>City Marquette State MI Zip Code 48955</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 289.68</p>			<p>Date of Receipt 05 / 08 / 2014 Transaction ID : SA11AI.48194 </p> <p>Amount of Each Receipt this Period 36.21 </p>		
<p>Full Name (Last, First, Middle Initial) C. SHANA ALDERTON</p> <p>Mailing Address 710 Chippewa Square</p> <p>City Marquette State MI Zip Code 48955</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 325.89</p>			<p>Date of Receipt 05 / 21 / 2014 Transaction ID : SA11AI.48217 </p> <p>Amount of Each Receipt this Period 36.21 </p>		
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			103.42		
<p>TOTAL This Period (last page this line number only)..... ▶</p>					

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

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

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 403

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

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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. LISA A. ALEXANDER

Mailing Address 5050 Westbrook Street SE

City

Magnolia

State

OH

Zip Code

44643

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH CN 8

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

259.19

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 06 / 2014

Transaction ID : SA11AI.47783

Amount of Each Receipt this Period

53.20

Full Name (Last, First, Middle Initial)

B. SHARON J. ALEXANDER

Mailing Address 12510 Chalford Lane

City

Bowie

State

MD

Zip Code

20715

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ADMINISTRATIVE ASSISTANT II

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

345.96

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.47013

Amount of Each Receipt this Period

38.44

Full Name (Last, First, Middle Initial)

C. SHARON J. ALEXANDER

Mailing Address 12510 Chalford Lane

City

Bowie

State

MD

Zip Code

20715

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ADMINISTRATIVE ASSISTANT II

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

384.40

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.47439

Amount of Each Receipt this Period

38.44

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

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

130.08

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 403

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. KENNETH L. ALLEN

Mailing Address 7935 SW Santolina Place

City

Beaverton

State

OR

Zip Code

97008-6272

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OR CN 75

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

586.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	27	/	2014

Transaction ID : SA11AI.48368

Amount of Each Receipt this Period

14.00

Full Name (Last, First, Middle Initial)

B. KENNETH L. ALLEN

Mailing Address 7935 SW Santolina Place

City

Beaverton

State

OR

Zip Code

97008-6272

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OR CN 75

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	30	/	2014

Transaction ID : SA11AI.47919

Amount of Each Receipt this Period

129.00

Full Name (Last, First, Middle Initial)

C. CONNIE G. ALONZO

Mailing Address 6082 E CR 700S

City

Plainfield

State

IN

Zip Code

46168

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

FIELD OFFICE ASSISTANT I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	27	/	2014

Transaction ID : SA11AI.47440

Amount of Each Receipt this Period

21.80

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

164.80

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 13 OF 403

(check only one)

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

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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. LAQUITA ALSUM

Mailing Address 1424 N. Pennsylvania Street

City	State	Zip Code
Indianapolis	IN	46202

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME IN CN 62

Occupation

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
05	/	06	/	2014

Transaction ID : SA11AI.47894

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

B. BARBARA ANDERSON

Mailing Address 4301 Executive Park Drive

City	State	Zip Code
Harrisburg	PA	17111

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	12	/	2014

Transaction ID : SA11AI.47249

Amount of Each Receipt this Period

58.44

Full Name (Last, First, Middle Initial)

C. CAROL A ANDERSON

Mailing Address 303 Dias Drive

City	State	Zip Code
Fort Washington	MD	20744

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, EDUCATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

483.39

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	15	/	2014

Transaction ID : SA11AI.47016

Amount of Each Receipt this Period

53.71

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

154.15

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:
(check only one)

PAGE 14 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. CAROL A ANDERSON</p> <p>Mailing Address 303 Dias Drive</p> <p>City State Zip Code Fort Washington MD 20744</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L ASSOCIATE DIRECTOR, EDUCATION</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 537.10</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47442</p> <p>Amount of Each Receipt this Period 53.71</p>	
<p>Full Name (Last, First, Middle Initial) B. EARLENE ANDERSON</p> <p>Mailing Address 2396 Highway 22 W</p> <p>City State Zip Code Muscatine IA 52761</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME IA CN 61 CLERK</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 250.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 08 / 2014 Transaction ID : SA11AI.48857</p> <p>Amount of Each Receipt this Period 50.00</p>	
<p>Full Name (Last, First, Middle Initial) C. TIMOTHY T ANDERSON</p> <p>Mailing Address 2725 Eldred Court</p> <p>City State Zip Code Apopka FL 32712</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 250.20</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47017</p> <p>Amount of Each Receipt this Period 27.96</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>131.67</p>	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

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 403

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 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. TIMOTHY T ANDERSON Full Name (Last, First, Middle Initial) Mailing Address 2725 Eldred Court City Apopka State FL Zip Code 32712 FEC ID number of contributing federal political committee. C Name of Employer AFSCME INT'L Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 278.16			Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47443 Amount of Each Receipt this Period 27.96
B. MICHAEL ANDREJCO Full Name (Last, First, Middle Initial) Mailing Address 5075 Pajabon Drive #201 City Harrisburg State PA Zip Code 17111 FEC ID number of contributing federal political committee. C Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 369.50			Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.47250 Amount of Each Receipt this Period 73.90
C. KEITH J. ANGEL Full Name (Last, First, Middle Initial) Mailing Address 2711 Hafton Road City Columbus State OH Zip Code 43204 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00			Date of Receipt M M / D D / Y Y Y Y Y 05 / 30 / 2014 Transaction ID : SA11AI.48564 Amount of Each Receipt this Period 20.00
SUBTOTAL of Receipts This Page (optional)..... ▶			121.86
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:
(check only one)

PAGE 16 OF 403

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

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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. VANESSA ARPIN

Mailing Address 3910 237th Place SW

City State Zip Code
 Brier WA 98036

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME WA CN 28

Occupation

JOURNEY ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 13 / 2014

Transaction ID : SA11AI.48310

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. MICHAEL L. ARTZ

Mailing Address 745 Irving Street NW

City State Zip Code
 Washington DC 20010

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOCIATE GENERAL COUNSEL I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.28

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 15 / 2014

Transaction ID : SA11AI.47018

Amount of Each Receipt this Period

50.92

Full Name (Last, First, Middle Initial)

C. MICHAEL L. ARTZ

Mailing Address 745 Irving Street NW

City State Zip Code
 Washington DC 20010

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOCIATE GENERAL COUNSEL I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

509.20

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 27 / 2014

Transaction ID : SA11AI.47444

Amount of Each Receipt this Period

50.92

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

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

151.84

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

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

FOR LINE NUMBER:
(check only one)

PAGE 17 OF 403

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

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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. LAURA M. ASKELIN

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

AFSCME MN CN 5/CN14

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.84

Date of Receipt

05 / 06 / 2014

Transaction ID : SA11AI.48584

Amount of Each Receipt this Period

56.08

Full Name (Last, First, Middle Initial)

B. DEBORAH A. BABB

Mailing Address 6005 East Oakwood Drive

City

Pleasant Hill

State

IA

Zip Code

50327

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME IA CN 61/STATE OF IA

Occupation

SAFETY AND HEALTH CON.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 14 / 2014

Transaction ID : SA11AI.47759

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. W. JEAN BACKMAN

Mailing Address 1212 Jefferson Street

City

Olympia

State

WA

Zip Code

98501

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME WA CN 28

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 13 / 2014

Transaction ID : SA11AI.48311

Amount of Each Receipt this Period

50.00

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

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

136.08

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

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

FOR LINE NUMBER:
(check only one)

PAGE 18 OF 403

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

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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. ALDEAN BAER

Mailing Address 3505 West Lincolnshire Blvd.

City State Zip Code
Toledo OH 43606

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/WASHINGTON LS

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

05 / 29 / 2014

Transaction ID : SA11AI.48936

Amount of Each Receipt this Period

19.24

Full Name (Last, First, Middle Initial)

B. JOE BAESSLER

Mailing Address 2512 NE 50th

City State Zip Code
Portland OR 97213

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OR CN 75

Occupation

COUNCIL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

05 / 30 / 2014

Transaction ID : SA11AI.47920

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

C. DAWN M. BAILEY

Mailing Address 4060 LaPlante Road

City State Zip Code
Monclova OH 43542

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH CN 8

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.42

Date of Receipt

05 / 06 / 2014

Transaction ID : SA11AI.47785

Amount of Each Receipt this Period

54.32

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

153.56

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 PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 403

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. KAREN S. BAILEY

Mailing Address 1277 Circle 182

City

Kitts Hill

State

OH

Zip Code

45645

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	29	/	2014

Transaction ID : SA11AI.48132

Amount of Each Receipt this Period

19.24

Full Name (Last, First, Middle Initial)

B. PATRICIA A. BAILEY

Mailing Address 606 N. Van Buren Street

City

Wilmington

State

DE

Zip Code

19805

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME DE CN 81

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.92

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	08	/	2014

Transaction ID : SA11AI.48012

Amount of Each Receipt this Period

65.34

Full Name (Last, First, Middle Initial)

C. PATRICIA A. BAILEY

Mailing Address 606 N. Van Buren Street

City

Wilmington

State

DE

Zip Code

19805

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME DE CN 81

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.26

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	08	/	2014

Transaction ID : SA11AI.48019

Amount of Each Receipt this Period

65.34

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

149.92

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

[illegible]

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

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

FOR LINE NUMBER:
(check only one)

PAGE 21 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. MATTHEW BALAS</p> <p>Mailing Address 307 Adams Street</p> <p>City Freeland State PA Zip Code 18224</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 266.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.47251</p> <p>Amount of Each Receipt this Period 53.20</p>
<p>Full Name (Last, First, Middle Initial) B. GRACE A. BALTICH</p> <p>Mailing Address 11711 Douglas Drive N</p> <p>City Champlin State MN Zip Code 55316</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME MN CN 65 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 244.30</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 19 / 2014 Transaction ID : SA11AI.48458</p> <p>Amount of Each Receipt this Period 48.86</p>
<p>Full Name (Last, First, Middle Initial) C. MATTHEW M. BANAL</p> <p>Mailing Address 5424 Olde Vintage Drive</p> <p>City Hilliard State OH Zip Code 43026</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 346.23</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.48029</p> <p>Amount of Each Receipt this Period 38.47</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		140.53
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

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 403

(check only one)

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

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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. MATTHEW M. BANAL

Mailing Address 5424 Olde Vintage Drive

City	State	Zip Code
Hilliard	OH	43026

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

386.23

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	12	/	2014

Transaction ID : SA11AI.49043

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. MATTHEW M. BANAL

Mailing Address 5424 Olde Vintage Drive

City	State	Zip Code
Hilliard	OH	43026

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.23

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	20	/	2014

Transaction ID : SA11AI.49044

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. MATTHEW M. BANAL

Mailing Address 5424 Olde Vintage Drive

City	State	Zip Code
Hilliard	OH	43026

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	27	/	2014

Transaction ID : SA11AI.48081

Amount of Each Receipt this Period

38.47

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

128.47

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 403

(check only one)

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

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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. MATTHEW M. BANAL

Mailing Address 5424 Olde Vintage Drive

City State Zip Code
Hilliard OH 43026

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

513.17

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 29 / 2014

Transaction ID : SA11AI.48133

Amount of Each Receipt this Period

38.47

Full Name (Last, First, Middle Initial)

B. ELAINE BARBER

Mailing Address 1826 Forster Street

City State Zip Code
Harrisburg PA 17103

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.39

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 12 / 2014

Transaction ID : SA11AI.47252

Amount of Each Receipt this Period

53.20

Full Name (Last, First, Middle Initial)

C. TERRI L. BARNARD

Mailing Address 1212 Jefferson St., SE
Suite 300

City State Zip Code
Olympia WA 98501

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 23 / 2014

Transaction ID : SA11AI.48312

Amount of Each Receipt this Period

21.00

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

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

112.67

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 24 OF 403

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

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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. MICHAEL BARRIOS

Mailing Address 514 Shatto Place

City

Los Angeles

State

CA

Zip Code

90020

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME CA CN 36/LOCAL 685

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

05 / 14 / 2014

Transaction ID : SA11AI.48474

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. RANDY D BARTON

Mailing Address 825 SE Cortina Drive

City

Ankeny

State

IA

Zip Code

50021

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME IA CN 61/STATE OF IA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.10

Date of Receipt

05 / 20 / 2014

Transaction ID : SA11AI.48882

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. FATIMA A BASTIANELLI

Mailing Address 5604 Vernon Place

City

Bethesda

State

MD

Zip Code

20817

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

POLITICAL ACTION POLLING ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.09

Date of Receipt

05 / 15 / 2014

Transaction ID : SA11AI.47021

Amount of Each Receipt this Period

42.01

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

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

102.01

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

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

FOR LINE NUMBER:
(check only one)

PAGE 25 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. FATIMA A BASTIANELLI</p> <p>Mailing Address 5604 Vernon Place</p> <p>City State Zip Code Bethesda MD 20817</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L POLITICAL ACTION POLLING ASSISTANT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 420.10</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47447</p> <p>Amount of Each Receipt this Period 42.01</p>	
<p>Full Name (Last, First, Middle Initial) B. MICHAEL BATCHELDER</p> <p>Mailing Address 56 W. Dodridge Street</p> <p>City State Zip Code Columbus OH 43202</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH CN 8 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 263.02</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 06 / 2014 Transaction ID : SA11AI.47787</p> <p>Amount of Each Receipt this Period 57.36</p>	
<p>Full Name (Last, First, Middle Initial) C. LINDA BATES</p> <p>Mailing Address 1510 Walnut Street</p> <p>City State Zip Code Woodbridge VA 22191</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L EXECUTIVE OFFICE ASSISTANT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 332.64</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47022</p> <p>Amount of Each Receipt this Period 36.96</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			136.33	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

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

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

FOR LINE NUMBER:
(check only one)

PAGE 26 OF 403

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

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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. LINDA BATES

Mailing Address 1510 Walnut Street

City State Zip Code
 Woodbridge VA 22191

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

EXECUTIVE OFFICE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.60

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 27 / 2014

Transaction ID : SA11AI.47448

Amount of Each Receipt this Period

36.96

Full Name (Last, First, Middle Initial)

B. PATRICIA BAUER

Mailing Address 4031 Executive Park Drive

City State Zip Code
 Harrisburg PA 17111

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

498.30

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 12 / 2014

Transaction ID : SA11AI.47253

Amount of Each Receipt this Period

99.66

Full Name (Last, First, Middle Initial)

C. HENRY BAYER

Mailing Address 1507 W. Chase Street

City State Zip Code
 Chicago IL 60626-2125

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME IL CN 31

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

623.36

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 27 / 2014

Transaction ID : SA11AI.48369

Amount of Each Receipt this Period

28.00

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

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

164.62

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

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

FOR LINE NUMBER:
(check only one)

PAGE 27 OF 403

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

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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. MICHAEL BEGATTO

Mailing Address 301 Hedgerow Lane

City

Wilmington

State

DE

Zip Code

19807

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME DE CN 81

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

383.70

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 08 / 2014

Transaction ID : SA11AI.48013

Amount of Each Receipt this Period

91.48

Full Name (Last, First, Middle Initial)

B. MICHAEL BEGATTO

Mailing Address 301 Hedgerow Lane

City

Wilmington

State

DE

Zip Code

19807

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME DE CN 81

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.18

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 08 / 2014

Transaction ID : SA11AI.48020

Amount of Each Receipt this Period

91.48

Full Name (Last, First, Middle Initial)

C. MARTIN BEIL

Mailing Address 10363 Hudson Road

City

Mazomanie

State

WI

Zip Code

53560-9773

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME WI CN 24

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.91

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 02 / 2014

Transaction ID : SA11AI.48406

Amount of Each Receipt this Period

83.62

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

266.58

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:
(check only one)

PAGE 28 OF 403

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

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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. CHARLES BENN

Mailing Address 141 Eddington Avenue

City

Harrisburg

State

PA

Zip Code

17111-3520

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

518.30

Date of Receipt

05 / 12 / 2014

Transaction ID : SA11AI.47254

Amount of Each Receipt this Period

99.66

Full Name (Last, First, Middle Initial)

B. PETER J. BENNER

Mailing Address 7650 Cahill Avenue

City

Inver Grove Hgts.

State

MN

Zip Code

55076

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L/STATE STREET

Occupation

RETIREE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

224.18

Date of Receipt

05 / 01 / 2014

Transaction ID : SA11AI.47409

Amount of Each Receipt this Period

47.14

Full Name (Last, First, Middle Initial)

C. STACEY D. BENSON-TAYLOR

Mailing Address 241 Brooklyn Avenue

City

Dayton

State

OH

Zip Code

45417

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH CN 8

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

317.70

Date of Receipt

05 / 06 / 2014

Transaction ID : SA11AI.47788

Amount of Each Receipt this Period

63.84

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

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

210.64

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

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

FOR LINE NUMBER:
(check only one)

PAGE 29 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. BRENDA L BENTON</p> <p>Mailing Address 4406 E. Mound Street</p> <p>City State Zip Code Columbus OH 43227</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L FIELD OFFICE ASSISTANT II</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 237.78</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47023</p> <p>Amount of Each Receipt this Period 26.42</p>
<p>Full Name (Last, First, Middle Initial) B. BRENDA L BENTON</p> <p>Mailing Address 4406 E. Mound Street</p> <p>City State Zip Code Columbus OH 43227</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L FIELD OFFICE ASSISTANT II</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 264.20</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47449</p> <p>Amount of Each Receipt this Period 26.42</p>
<p>Full Name (Last, First, Middle Initial) C. SHIRIN BIDEL-NIYAT</p> <p>Mailing Address 1330 New Hampshire Avenue NW #403</p> <p>City State Zip Code Washington DC 20036</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L REGIONAL FIELD MANAGER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 271.81</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47024</p> <p>Amount of Each Receipt this Period 38.83</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		<p>91.67</p>
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

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

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for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 30 OF 403

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

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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. SHIRIN BIDEL-NIYAT

Mailing Address 1330 New Hampshire Avenue NW
#403

City State Zip Code
Washington DC 20036

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

REGIONAL FIELD MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.64

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.47450

Amount of Each Receipt this Period

38.83

Full Name (Last, First, Middle Initial)

B. JEAN BIRTLE

Mailing Address 4301 Executive Park Drive

City State Zip Code
Harrisburg PA 17111

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 12 / 2014

Transaction ID : SA11AI.47255

Amount of Each Receipt this Period

49.40

Full Name (Last, First, Middle Initial)

C. CHRISTINE C. BISCHOFF

Mailing Address 1825 Maple Avenue

City State Zip Code
Peekskill NY 10566

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME NY LOC 1000/NYS INST.

Occupation

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
05 / 29 / 2014

Transaction ID : SA11AI.48891

Amount of Each Receipt this Period

19.24

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

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

107.47

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

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

FOR LINE NUMBER:
(check only one)

PAGE 31 OF 403

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

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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. PAUL BISSEN

Mailing Address 1906 Bear Court SE

City
Rochester

State Zip Code
MN 55904

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MN CN 5/STATE OF MN

Occupation
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 28 / 2014

Transaction ID : SA11AI.47862

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

B. WALTER BLAIR

Mailing Address 2223 Wintergreen Avenue

City
District Heights

State Zip Code
MD 20747

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation
ASSISTANT DIRECTOR, ACCOUNTING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

433.89

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.47025

Amount of Each Receipt this Period

48.21

Full Name (Last, First, Middle Initial)

C. WALTER BLAIR

Mailing Address 2223 Wintergreen Avenue

City
District Heights

State Zip Code
MD 20747

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation
ASSISTANT DIRECTOR, ACCOUNTING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

482.10

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.47451

Amount of Each Receipt this Period

48.21

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

156.42

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:
(check only one)

PAGE 32 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 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. JANE ANN BLAKESLEY Full Name (Last, First, Middle Initial) Mailing Address 2179 Shoreham Road City State Zip Code Upper Arlington OH 43220 FEC ID number of contributing federal political committee. C Name of Employer Occupation AFSCME OH LOC 4 ADMINISTRATIVE ASSISTANT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 370.00			Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.47398 Amount of Each Receipt this Period 50.00	
B. JANE ANN BLAKESLEY Full Name (Last, First, Middle Initial) Mailing Address 2179 Shoreham Road City State Zip Code Upper Arlington OH 43220 FEC ID number of contributing federal political committee. C Name of Employer Occupation AFSCME OH LOC 4 ADMINISTRATIVE ASSISTANT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 410.00			Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.48032 Amount of Each Receipt this Period 40.00	
C. JANE ANN BLAKESLEY Full Name (Last, First, Middle Initial) Mailing Address 2179 Shoreham Road City State Zip Code Upper Arlington OH 43220 FEC ID number of contributing federal political committee. C Name of Employer Occupation AFSCME OH LOC 4 ADMINISTRATIVE ASSISTANT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00			Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.49045 Amount of Each Receipt this Period 40.00	
SUBTOTAL of Receipts This Page (optional)..... ▶			130.00	
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 33 OF 403

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 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. JANE ANN BLAKESLEY Full Name (Last, First, Middle Initial) Mailing Address 2179 Shoreham Road City State Zip Code Upper Arlington OH 43220 FEC ID number of contributing federal political committee. C Name of Employer Occupation AFSCME OH LOC 4 ADMINISTRATIVE ASSISTANT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 490.00			Date of Receipt <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> M M / D D / Y Y Y Y Y </div> <div style="display: flex; justify-content: space-between;"> 05 27 2014 </div> </div> Transaction ID : SA11AI.48084 Amount of Each Receipt this Period 40.00	
B. JANE ANN BLAKESLEY Full Name (Last, First, Middle Initial) Mailing Address 2179 Shoreham Road City State Zip Code Upper Arlington OH 43220 FEC ID number of contributing federal political committee. C Name of Employer Occupation AFSCME OH LOC 4 ADMINISTRATIVE ASSISTANT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 530.00			Date of Receipt <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> M M / D D / Y Y Y Y Y </div> <div style="display: flex; justify-content: space-between;"> 05 29 2014 </div> </div> Transaction ID : SA11AI.48136 Amount of Each Receipt this Period 40.00	
C. RONALD F. BLATT Full Name (Last, First, Middle Initial) Mailing Address 2202 S. Racoon Road Apt. 4 City State Zip Code Austintown OH 44515 FEC ID number of contributing federal political committee. C Name of Employer Occupation AFSCME OH LOC 4 FIELD REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 346.23			Date of Receipt <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> M M / D D / Y Y Y Y Y </div> <div style="display: flex; justify-content: space-between;"> 05 12 2014 </div> </div> Transaction ID : SA11AI.48033 Amount of Each Receipt this Period 38.47	
SUBTOTAL of Receipts This Page (optional)..... ▶			118.47	
TOTAL This Period (last page this line number only)..... ▶				

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 34 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. RONALD F. BLATT</p> <p>Mailing Address 2202 S. Racoon Road Apt. 4</p> <p>City Austintown State OH Zip Code 44515</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 384.70</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014</p> <p>Transaction ID : SA11AI.48085</p> <p>Amount of Each Receipt this Period 38.47</p>	
<p>Full Name (Last, First, Middle Initial) B. RONALD F. BLATT</p> <p>Mailing Address 2202 S. Racoon Road Apt. 4</p> <p>City Austintown State OH Zip Code 44515</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 423.17</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 29 / 2014</p> <p>Transaction ID : SA11AI.48137</p> <p>Amount of Each Receipt this Period 38.47</p>	
<p>Full Name (Last, First, Middle Initial) C. KAREN BLOOMINGDALE</p> <p>Mailing Address 4301 Executive Park Drive</p> <p>City Harrisburg State PA Zip Code 17111</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 363.10</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014</p> <p>Transaction ID : SA11AI.47256</p> <p>Amount of Each Receipt this Period 72.62</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>149.56</p>	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

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

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 35 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. MATTHEW S. BLUMIN</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47026</p>		
<p>Mailing Address 1336 Taylor Street NW</p>			<p>Amount of Each Receipt this Period 50.92</p>		
<p>City Washington</p>	<p>State DC</p>	<p>Zip Code 20036</p>			
<p>FEC ID number of contributing federal political committee. C</p>					
<p>Name of Employer AFSCME INT'L</p>		<p>Occupation ASSOCIATE GENERAL COUNSEL I</p>			
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Aggregate Year-to-Date ▼ 458.28</p>			
<p>Full Name (Last, First, Middle Initial) B. MATTHEW S. BLUMIN</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47452</p>		
<p>Mailing Address 1336 Taylor Street NW</p>			<p>Amount of Each Receipt this Period 50.92</p>		
<p>City Washington</p>	<p>State DC</p>	<p>Zip Code 20036</p>			
<p>FEC ID number of contributing federal political committee. C</p>					
<p>Name of Employer AFSCME INT'L</p>		<p>Occupation ASSOCIATE GENERAL COUNSEL I</p>			
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Aggregate Year-to-Date ▼ 509.20</p>			
<p>Full Name (Last, First, Middle Initial) C. DAVID L. BLYTH</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 06 / 2014 Transaction ID : SA11AI.47790</p>		
<p>Mailing Address 1656 Gilbert Road</p>			<p>Amount of Each Receipt this Period 60.26</p>		
<p>City Toledo</p>	<p>State OH</p>	<p>Zip Code 43614</p>			
<p>FEC ID number of contributing federal political committee. C</p>					
<p>Name of Employer AFSCME OH CN 8</p>		<p>Occupation STAFF REPRESENTATIVE</p>			
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Aggregate Year-to-Date ▼ 299.98</p>			
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			162.10		
<p>TOTAL This Period (last page this line number only)..... ▶</p>					

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

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 36 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. THOMAS J. BOIK</p> <p>Mailing Address 300 Hardman Avenue South</p> <p>City State Zip Code South St. Paul MN 55075</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MN CN 5/CN14 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 230.46</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 06 / 2014 Transaction ID : SA11AI.48587</p> <p>Amount of Each Receipt this Period 46.20</p>
<p>Full Name (Last, First, Middle Initial) B. LYNDAL BOLIN</p> <p>Mailing Address 8 Circle Drive</p> <p>City State Zip Code The Plains OH 45780</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4 FIELD REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 213.16</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.49047</p> <p>Amount of Each Receipt this Period 40.00</p>
<p>Full Name (Last, First, Middle Initial) C. LYNDAL BOLIN</p> <p>Mailing Address 8 Circle Drive</p> <p>City State Zip Code The Plains OH 45780</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4 FIELD REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 263.16</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 20 / 2014 Transaction ID : SA11AI.49048</p> <p>Amount of Each Receipt this Period 50.00</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		136.20
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

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

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

FOR LINE NUMBER: PAGE 37 OF 403
(check only one)

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

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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. LYND A L. BOLIN

Mailing Address 8 Circle Drive

City State Zip Code
The Plains OH 45780

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.40

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.48087

Amount of Each Receipt this Period

19.24

Full Name (Last, First, Middle Initial)

B. LYND A L. BOLIN

Mailing Address 8 Circle Drive

City State Zip Code
The Plains OH 45780

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.64

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 29 / 2014

Transaction ID : SA11AI.48139

Amount of Each Receipt this Period

19.24

Full Name (Last, First, Middle Initial)

C. PAUL R. BOOTH

Mailing Address 3724 Benton Street NW

City State Zip Code
Washington DC 20007-1803

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

EXECUTIVE ASST. TO PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2069.46

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.47028

Amount of Each Receipt this Period

195.08

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

233.56

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

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

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 38 OF 403

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

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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. PAUL R. BOOTH

Mailing Address 3724 Benton Street NW

City
Washington

State Zip Code
DC 20007-1803

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

EXECUTIVE ASST. TO PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2264.54

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.47454

Amount of Each Receipt this Period

195.08

Full Name (Last, First, Middle Initial)

B. SHARON K BORTON

Mailing Address 5359 29th Street NW

City
Washington

State Zip Code
DC 20015

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSIST. DIRECTOR, HUMAN RESOURCES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

483.39

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.47029

Amount of Each Receipt this Period

53.71

Full Name (Last, First, Middle Initial)

C. SHARON K BORTON

Mailing Address 5359 29th Street NW

City
Washington

State Zip Code
DC 20015

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSIST. DIRECTOR, HUMAN RESOURCES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

537.10

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.47455

Amount of Each Receipt this Period

53.71

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

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

302.50

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

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 39 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. JACQUELINE M. BOWMAN-PORTER</p> <p>Mailing Address 345 4th Avenue Apt. 6A1</p> <p>City Pittsburgh State PA Zip Code 15222</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME PA CN 13/NSP.LOCAL 2924 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 250.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.47375</p> <p>Amount of Each Receipt this Period 50.00</p>
<p>Full Name (Last, First, Middle Initial) B. ERIC R. BOYD</p> <p>Mailing Address 118 East Walnut Street</p> <p>City Westerville State OH Zip Code 43801</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH CN 8 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 315.33</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 06 / 2014 Transaction ID : SA11AI.47791</p> <p>Amount of Each Receipt this Period 64.40</p>
<p>Full Name (Last, First, Middle Initial) C. MELVIN BRABSON</p> <p>Mailing Address 5510 Chalmers</p> <p>City Detroit State MI Zip Code 48213</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 201.18</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 08 / 2014 Transaction ID : SA11AI.48195</p> <p>Amount of Each Receipt this Period 25.97</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		140.37
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

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

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Detailed Summary Page

FOR LINE NUMBER:
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PAGE 40 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. MELVIN BRABSON</p> <p>Mailing Address 5510 Chalmers</p> <p>City State Zip Code Detroit MI 48213</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MI CN 25 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 227.15</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 21 / 2014 Transaction ID : SA11AI.48218</p> <p>Amount of Each Receipt this Period 25.97</p>
<p>Full Name (Last, First, Middle Initial) B. CHRISTINE L. BRANAM</p> <p>Mailing Address 4031 Executive Park Drive</p> <p>City State Zip Code Harrisburg PA 17111</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME PA CN 13 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 247.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.47258</p> <p>Amount of Each Receipt this Period 49.40</p>
<p>Full Name (Last, First, Middle Initial) C. CHRISTINE M. BRANCHAW</p> <p>Mailing Address 2223 NE Davis Street</p> <p>City State Zip Code Portland OR 97232</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OR CN 75/STATE OF OR CARPENTER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 227.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 30 / 2014 Transaction ID : SA11AI.47924</p> <p>Amount of Each Receipt this Period 31.00</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		106.37
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SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 41 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. TALISHIA R. BRANDAO</p> <p>Mailing Address 155 Market Street</p> <p>City Highspire State PA Zip Code 17034</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME PA CN 13/STATE OF PA Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 325.00</p>		<p>Date of Receipt 05 / 30 / 2014 Transaction ID : SA11AI.48745</p> <p>Amount of Each Receipt this Period 50.00</p>
<p>Full Name (Last, First, Middle Initial) B. MARIANO F. BRANTLEY</p> <p>Mailing Address 737 Grace Avenue</p> <p>City Akron State OH Zip Code 44320</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4/AKRON CITY Occupation TEACHER AIDE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 215.00</p>		<p>Date of Receipt 05 / 12 / 2014 Transaction ID : SA11AI.48937</p> <p>Amount of Each Receipt this Period 40.00</p>
<p>Full Name (Last, First, Middle Initial) C. WILLIAM BRENNER</p> <p>Mailing Address 3300 Old Trail Road</p> <p>City York Haven State PA Zip Code 17370</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 498.30</p>		<p>Date of Receipt 05 / 12 / 2014 Transaction ID : SA11AI.47259</p> <p>Amount of Each Receipt this Period 99.66</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		<p>189.66</p>
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

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

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 42 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. TERRY L. BRENTLINGER</p> <p>Mailing Address 145 N. Main Street</p> <p>City Lakeview State OH Zip Code 43331</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 220.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 30 / 2014 Transaction ID : SA11AI.48565 </p> <p>Amount of Each Receipt this Period 20.00 </p>		
<p>Full Name (Last, First, Middle Initial) B. BILL BROCKMILLER</p> <p>Mailing Address 1418 10th Street #204</p> <p>City Lacrosse State WI Zip Code 54601</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME WI CN 24/STATE OF WI Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 270.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 02 / 2014 Transaction ID : SA11AI.48415 </p> <p>Amount of Each Receipt this Period 30.00 </p>		
<p>Full Name (Last, First, Middle Initial) C. BILL BROCKMILLER</p> <p>Mailing Address 1418 10th Street #204</p> <p>City Lacrosse State WI Zip Code 54601</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME WI CN 24/STATE OF WI Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 300.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 16 / 2014 Transaction ID : SA11AI.48419 </p> <p>Amount of Each Receipt this Period 30.00 </p>		
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>80.00</p>		
<p>TOTAL This Period (last page this line number only)..... ▶</p>					

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

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 43 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. MATTHEW BROKMAN</p> <p>Mailing Address 120 Dwight Street #606</p> <p>City State Zip Code New Haven CT 06511-0000</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME CT CN 4 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 286.29</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 14 / 2014 Transaction ID : SA11AI.47898</p> <p>Amount of Each Receipt this Period 58.92</p>
<p>Full Name (Last, First, Middle Initial) B. MARQUEZ BROWN</p> <p>Mailing Address 6800 N High ST</p> <p>City State Zip Code Worthington OH 43085</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH CN 8 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 256.76</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 06 / 2014 Transaction ID : SA11AI.47793</p> <p>Amount of Each Receipt this Period 51.58</p>
<p>Full Name (Last, First, Middle Initial) C. WANDA BROWN</p> <p>Mailing Address 17311 NW 46th Avenue</p> <p>City State Zip Code Carol City FL 33055</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L LEAD ORGANIZER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 320.94</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47030</p> <p>Amount of Each Receipt this Period 35.66</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		<p>146.16</p>
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

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

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

FOR LINE NUMBER:
(check only one)

PAGE 44 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. WANDA BROWN</p> <p>Mailing Address 17311 NW 46th Avenue</p> <p>City State Zip Code Carol City FL 33055</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L LEAD ORGANIZER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 356.60</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014</p> <p>Transaction ID : SA11AI.47456</p> <p>Amount of Each Receipt this Period 35.66</p>
<p>Full Name (Last, First, Middle Initial) B. ALAN BRUBACHER</p> <p>Mailing Address 2502 S. 4th Street</p> <p>City State Zip Code Steelton PA 17113</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME PA CN 13 MAINTENANCE SUPERVISOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 247.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014</p> <p>Transaction ID : SA11AI.47260</p> <p>Amount of Each Receipt this Period 49.40</p>
<p>Full Name (Last, First, Middle Initial) C. EDITH E. BUCKLE</p> <p>Mailing Address 1184 Trentwood Road</p> <p>City State Zip Code Columbus OH 43221</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH CN 8 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 278.74</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 06 / 2014</p> <p>Transaction ID : SA11AI.47794</p> <p>Amount of Each Receipt this Period 56.00</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		<p>141.06</p>
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 OF 403

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. CARTER A. BUNDY

Mailing Address 1968 Otowi Drive

City	State	Zip Code
Santa Fe	NM	87505

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

POLITICAL ACTION REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

402.19

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	15	/	2014

Transaction ID : SA11AI.47031

Amount of Each Receipt this Period

68.08

Full Name (Last, First, Middle Initial)

B. CARTER A. BUNDY

Mailing Address 1968 Otowi Drive

City	State	Zip Code
Santa Fe	NM	87505

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

POLITICAL ACTION REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.27

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	27	/	2014

Transaction ID : SA11AI.47457

Amount of Each Receipt this Period

68.08

Full Name (Last, First, Middle Initial)

C. CAROL L. BURNETT

Mailing Address 1921 N. Westmoreland Street

City	State	Zip Code
Arlington	VA	22213

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

GRAPHIC MANAGER, COMMUNICATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

483.39

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	15	/	2014

Transaction ID : SA11AI.47032

Amount of Each Receipt this Period

53.71

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

189.87

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

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

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

FOR LINE NUMBER: PAGE 46 OF 403
(check only one)

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

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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. CAROL L. BURNETT

Mailing Address 1921 N. Westmoreland Street

City State Zip Code
Arlington VA 22213

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

GRAPHIC MANAGER, COMMUNICATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

537.10

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.47458

Amount of Each Receipt this Period

53.71

Full Name (Last, First, Middle Initial)

B. DOUGLAS R. BURNETT

Mailing Address 3473 14th Street NW

City State Zip Code
Washington DC 20010

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, POLITICAL ACTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

483.39

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.47033

Amount of Each Receipt this Period

53.71

Full Name (Last, First, Middle Initial)

C. DOUGLAS R. BURNETT

Mailing Address 3473 14th Street NW

City State Zip Code
Washington DC 20010

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, POLITICAL ACTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

537.10

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.47459

Amount of Each Receipt this Period

53.71

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

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

161.13

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

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

FOR LINE NUMBER:
(check only one)

PAGE 47 OF 403

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

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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. NICOLE BUTLER

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
AFSCME WA CN 28/STATE OF WA

Occupation
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

05 / 09 / 2014

Transaction ID : SA11AI.48279

Amount of Each Receipt this Period

23.00

Full Name (Last, First, Middle Initial)

B. NICOLE BUTLER

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
AFSCME WA CN 28/STATE OF WA

Occupation
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.00

Date of Receipt

05 / 23 / 2014

Transaction ID : SA11AI.48313

Amount of Each Receipt this Period

23.00

Full Name (Last, First, Middle Initial)

C. PAULA J. CAIRA

Mailing Address 17 Fourteenth Street SE

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOCIATE GENERAL COUNSEL II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

557.10

Date of Receipt

05 / 15 / 2014

Transaction ID : SA11AI.47035

Amount of Each Receipt this Period

61.90

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

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

107.90

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

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

FOR LINE NUMBER: PAGE 48 OF 403
(check only one)

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

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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. PAULA J. CAIRA

Mailing Address 17 Fourteenth Street SE

City State Zip Code
Washington DC 20003

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOCIATE GENERAL COUNSEL II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

619.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.47461

Amount of Each Receipt this Period

61.90

Full Name (Last, First, Middle Initial)

B. NINA M. CALABRIA

Mailing Address 6124 Crystal Valley Drive

City State Zip Code
Galena OH 43021

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 12 / 2014

Transaction ID : SA11AI.48036

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. NINA M. CALABRIA

Mailing Address 6124 Crystal Valley Drive

City State Zip Code
Galena OH 43021

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.48088

Amount of Each Receipt this Period

25.00

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

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

111.90

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

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

FOR LINE NUMBER:
(check only one)

PAGE 49 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. NINA M. CALABRIA</p> <p>Mailing Address 6124 Crystal Valley Drive</p> <p>City State Zip Code Galena OH 43021</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4 ADMINISTRATIVE ASSISTANT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 315.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 29 / 2014 Transaction ID : SA11AI.48140</p> <p>Amount of Each Receipt this Period 25.00</p>	
<p>Full Name (Last, First, Middle Initial) B. ROBIN CALABRIA</p> <p>Mailing Address 2507 Winslow Hill Road</p> <p>City State Zip Code Benezette PA 15821</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME PA CN 13 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 204.12</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.47261</p> <p>Amount of Each Receipt this Period 42.16</p>	
<p>Full Name (Last, First, Middle Initial) C. CHAD D. CALDWELL</p> <p>Mailing Address 1468 Galway Bend Drive S.</p> <p>City State Zip Code Pataskala OH 43062</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4 FIELD REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 315.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.48037</p> <p>Amount of Each Receipt this Period 35.00</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>102.16</p>	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 50 OF 403
(check only one)

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

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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. CHAD D. CALDWELL

Mailing Address 1468 Galway Bend Drive S.

City State Zip Code
Pataskala OH 43062

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.48089

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

B. CHAD D. CALDWELL

Mailing Address 1468 Galway Bend Drive S.

City State Zip Code
Pataskala OH 43062

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 29 / 2014

Transaction ID : SA11AI.48141

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

C. LINDA CANAN-STEPHENS

Mailing Address 9013 Advantage Court

City State Zip Code
Burke VA 22015

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

EXEC. ASSISTANT TO SECRETARY TREAS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

949.50

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.47036

Amount of Each Receipt this Period

105.50

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

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

175.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

 FOR LINE NUMBER:
 (check only one)

PAGE 51 OF 403

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. LINDA CANAN-STEPHENS

Mailing Address 9013 Advantage Court

City	State	Zip Code
Burke	VA	22015

FEC ID number of contributing federal political committee.

Name of Employer

AFSCME INT'L

Occupation

EXEC. ASSISTANT TO SECRETARY TREAS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	27	/	2014

Transaction ID : SA11AI.47462

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

B. RICHARD CAPONI

Mailing Address 4453 Stilley Road

City	State	Zip Code
Pittsburgh	PA	15227

FEC ID number of contributing federal political committee.

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	12	/	2014

Transaction ID : SA11AI.47262

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. GINO A. CARBENIA

Mailing Address 9315 N. Park Avenue

City	State	Zip Code
Indianapolis	IN	46240

FEC ID number of contributing federal political committee.

Name of Employer

AFSCME INT'L

Occupation

REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	15	/	2014

Transaction ID : SA11AI.47038

Amount of Each Receipt this Period

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 52 OF 403
 (check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. GINO A. CARBENIA

Mailing Address 9315 N. Park Avenue

City	State	Zip Code
Indianapolis	IN	46240

FEC ID number of contributing federal political committee.

Name of Employer

AFSCME INT'L

Occupation

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
05		27		2014

Transaction ID : SA11AI.47464

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

B. JOYCE CARLSON

Mailing Address 911 Aldine Street

City	State	Zip Code
Saint Paul	MN	55104

FEC ID number of contributing federal political committee.

Name of Employer

AFSCME MN CN 5/CN14

Occupation

BUSINESS 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
05		06		2014

Transaction ID : SA11AI.48588

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. SHERI CARNAHAN

Mailing Address 2007 Emerald Drive

City	State	Zip Code
Davenport	IA	52084

FEC ID number of contributing federal political committee.

Name of Employer

AFSCME IA CN 61

Occupation

WORKFORCE ADVISOR 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
05		08		2014

Transaction ID : SA11AI.48860

Amount of Each Receipt this Period

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 53 OF 403

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. WILLIAM J. CARRIER</p> <p>Mailing Address 731 Mohican Drive</p> <p>City Loveland State OH Zip Code 45140</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4/LOVELAND CS Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 206.72</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.48938</p> <p>Amount of Each Receipt this Period 20.84</p>	
<p>Full Name (Last, First, Middle Initial) B. WILLIAM J. CARRIER</p> <p>Mailing Address 731 Mohican Drive</p> <p>City Loveland State OH Zip Code 45140</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4/LOVELAND CS Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 227.56</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.48939</p> <p>Amount of Each Receipt this Period 20.84</p>	
<p>Full Name (Last, First, Middle Initial) C. WILLIAM J. CARRIER</p> <p>Mailing Address 731 Mohican Drive</p> <p>City Loveland State OH Zip Code 45140</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4/LOVELAND CS Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 248.40</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.48940</p> <p>Amount of Each Receipt this Period 20.84</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			62.52	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

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

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

FOR LINE NUMBER:
(check only one)

PAGE 54 OF 403

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

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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. JUAN CARTER

Mailing Address 1716 Revere Street

City

Harrisburg

State

PA

Zip Code

17104

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.76

Date of Receipt

05 / 12 / 2014

Transaction ID : SA11AI.47263

Amount of Each Receipt this Period

34.20

Full Name (Last, First, Middle Initial)

B. LEROY CARTER

Mailing Address 2648 Towner Road

City

Ann Arbor

State

MI

Zip Code

48105

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.96

Date of Receipt

05 / 08 / 2014

Transaction ID : SA11AI.48196

Amount of Each Receipt this Period

29.12

Full Name (Last, First, Middle Initial)

C. LEROY CARTER

Mailing Address 2648 Towner Road

City

Ann Arbor

State

MI

Zip Code

48105

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.08

Date of Receipt

05 / 21 / 2014

Transaction ID : SA11AI.48219

Amount of Each Receipt this Period

29.12

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

92.44

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 55 OF 403

(check only one)

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

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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. ROBERT CASON

Mailing Address 4301 Executive Park Drive

City State Zip Code
Harrisburg PA 17111

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

498.30

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 12 / 2014

Transaction ID : SA11AI.47264

Amount of Each Receipt this Period

99.66

Full Name (Last, First, Middle Initial)

B. TARA CAUGHEY-WILSON

Mailing Address 114 Thompson Street

City State Zip Code
Dalton PA 18414

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

CLERK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.50

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 12 / 2014

Transaction ID : SA11AI.47265

Amount of Each Receipt this Period

73.90

Full Name (Last, First, Middle Initial)

C. ANNE-MARIE CAVANAUGH

Mailing Address 9227 Densmore Avenue N

City State Zip Code
Seattle WA 98103

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME WA CN 28

Occupation

COUNCIL 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
05 / 13 / 2014

Transaction ID : SA11AI.48314

Amount of Each Receipt this Period

41.68

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

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

215.24

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

 FOR LINE NUMBER:
 (check only one)

PAGE 56 OF 403

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial) A. JAMES CENERINI			Date of Receipt M M / D D / Y Y Y Y Y 05 / 14 / 2014 Transaction ID : SA11AI.48424		
Mailing Address 1179 Charles Street					
City	State	Zip Code			
North Providence	RI	02904-3594			
FEC ID number of contributing federal political committee.		C			
Name of Employer AFSCME RI CN 94		Occupation POLITICAL COORDINATOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00			
Full Name (Last, First, Middle Initial) B. JEANETTE CHAVEZ			Date of Receipt M M / D D / Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47041		
Mailing Address 1719 Lyman Place NE					
City	State	Zip Code			
Washington	DC	20002			
FEC ID number of contributing federal political committee.		C			
Name of Employer AFSCME INT'L		Occupation EXECUTIVE OFFICE ASSISTANT			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 539.37			
Full Name (Last, First, Middle Initial) C. JEANETTE CHAVEZ			Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47467		
Mailing Address 1719 Lyman Place NE					
City	State	Zip Code			
Washington	DC	20002			
FEC ID number of contributing federal political committee.		C			
Name of Employer AFSCME INT'L		Occupation EXECUTIVE OFFICE ASSISTANT			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 599.30			
SUBTOTAL of Receipts This Page (optional)..... ▶			239.86		
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 57 OF 403
 (check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial) A. KARL E. CHILDRESS			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47042	
Mailing Address 1605 E Street SE			Amount of Each Receipt this Period 52.28	
City Washington	State DC	Zip Code 20003		
FEC ID number of contributing federal political committee. C				
Name of Employer AFSCME INT'L		Occupation MANAGER, APPLICATIONS DEVELOPMENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 470.52		
Full Name (Last, First, Middle Initial) B. KARL E. CHILDRESS			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 16 / 2014 Transaction ID : SA11AI.49063	
Mailing Address 1605 E Street SE			Amount of Each Receipt this Period 25.00	
City Washington	State DC	Zip Code 20003		
FEC ID number of contributing federal political committee. C				
Name of Employer AFSCME INT'L		Occupation MANAGER, APPLICATIONS DEVELOPMENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 495.52		
Full Name (Last, First, Middle Initial) C. KARL E. CHILDRESS			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47468	
Mailing Address 1605 E Street SE			Amount of Each Receipt this Period 52.28	
City Washington	State DC	Zip Code 20003		
FEC ID number of contributing federal political committee. C				
Name of Employer AFSCME INT'L		Occupation MANAGER, APPLICATIONS DEVELOPMENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 547.80		
SUBTOTAL of Receipts This Page (optional).....			129.56	
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:
(check only one)

PAGE 58 OF 403

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

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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. NICHELLE CHIVIS

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

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

369.50

Date of Receipt

05 / 12 / 2014

Transaction ID : SA11AI.47266

Amount of Each Receipt this Period

73.90

Full Name (Last, First, Middle Initial)

B. JUDY K. CHOW

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

AFSCME HI LOC 152

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 02 / 2014

Transaction ID : SA11AI.47946

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. CAROLYN CLARK

Mailing Address 4415 Rolling Pine

City

West Bloomfield

State

MI

Zip Code

48324

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

05 / 21 / 2014

Transaction ID : SA11AI.48220

Amount of Each Receipt this Period

25.00

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

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

198.90

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

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

FOR LINE NUMBER:
(check only one)

PAGE 59 OF 403

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

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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. SHANE CLARK

Mailing Address 5296 Autumnwood Drive

City State Zip Code
Cochran PA 16314

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.26

Date of Receipt

05 / 12 / 2014

Transaction ID : SA11AI.47267

Amount of Each Receipt this Period

53.20

Full Name (Last, First, Middle Initial)

B. DONALD L. CLINE

Mailing Address 21 E Hope Place

City State Zip Code
Shelton WA 98584

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.00

Date of Receipt

05 / 09 / 2014

Transaction ID : SA11AI.48280

Amount of Each Receipt this Period

37.00

Full Name (Last, First, Middle Initial)

C. DONALD L. CLINE

Mailing Address 21 E Hope Place

City State Zip Code
Shelton WA 98584

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

05 / 23 / 2014

Transaction ID : SA11AI.48315

Amount of Each Receipt this Period

37.00

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

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

127.20

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

PAGE 60 OF 403

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. AARON J. COLE

Mailing Address 1520 Brighton Way SE

City	State	Zip Code
Olympia	WA	98501

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

INT'L UNION REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.48

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	15	/	2014

Transaction ID : SA11AI.47044

Amount of Each Receipt this Period

33.72

Full Name (Last, First, Middle Initial)

B. AARON J. COLE

Mailing Address 1520 Brighton Way SE

City	State	Zip Code
Olympia	WA	98501

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

INT'L UNION REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.20

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	27	/	2014

Transaction ID : SA11AI.47470

Amount of Each Receipt this Period

33.72

Full Name (Last, First, Middle Initial)

C. KENTON C. COLE

Mailing Address P.O. Box 882

City	State	Zip Code
Lomax	IA	61454

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME IA CN 61

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	08	/	2014

Transaction ID : SA11AI.48861

Amount of Each Receipt this Period

100.00

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

167.44

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:
(check only one)

PAGE 61 OF 403

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

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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. CONSTANCE COMBS

Mailing Address 5785 Lake Road

City State Zip Code
Morrow OH 45152

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 4/LITTLE MIAMI

Occupation
CUSTODIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.32

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 12 / 2014

Transaction ID : SA11AI.47393

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. CONSTANCE COMBS

Mailing Address 5785 Lake Road

City State Zip Code
Morrow OH 45152

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 4/LITTLE MIAMI

Occupation
CUSTODIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.15

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 12 / 2014

Transaction ID : SA11AI.48942

Amount of Each Receipt this Period

20.83

Full Name (Last, First, Middle Initial)

C. TRACEY CONATY

Mailing Address 3525 Quebec Street NW

City State Zip Code
Washington DC 20016

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, NEW MEDIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

483.39

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.47045

Amount of Each Receipt this Period

53.71

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

174.54

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 PageFOR LINE NUMBER:
(check only one)

PAGE 62 OF 403

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

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

NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. TRACEY CONATY

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

AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, NEW MEDIA

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

537.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2014

Transaction ID : SA11AI.47471

Amount of Each Receipt this Period

53.71

Full Name (Last, First, Middle Initial)

B. HILARY L. CONLEY

Mailing Address 3443 Pine Way

City

Powell

State

OH

Zip Code

43065

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH CN 8

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

219.92

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2014

Transaction ID : SA11AI.47796

Amount of Each Receipt this Period

44.20

Full Name (Last, First, Middle Initial)

C. BELINDA D. CONRAD

Mailing Address 3062 Pebble Court

City

Maumee

State

OH

Zip Code

43537

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/SYLVANIA

Occupation

TEACHER AIDE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

213.16

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2014

Transaction ID : SA11AI.48943

Amount of Each Receipt this Period

19.24

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

117.15

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 PageFOR LINE NUMBER:
(check only one)

PAGE 63 OF 403

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. BELINDA D. CONRAD

Mailing Address 3062 Pebble Court

City

Maumee

State

OH

Zip Code

43537

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/SYLVANIA

Occupation

TEACHER AIDE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

253.16

Date of Receipt

M M	D D	Y Y Y Y
05	12	2014

Transaction ID : SA11AI.48944

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. BELINDA D. CONRAD

Mailing Address 3062 Pebble Court

City

Maumee

State

OH

Zip Code

43537

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/SYLVANIA

Occupation

TEACHER AIDE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

278.16

Date of Receipt

M M	D D	Y Y Y Y
05	12	2014

Transaction ID : SA11AI.48945

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. BELINDA D. CONRAD

Mailing Address 3062 Pebble Court

City

Maumee

State

OH

Zip Code

43537

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/SYLVANIA

Occupation

TEACHER AIDE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

297.40

Date of Receipt

M M	D D	Y Y Y Y
05	27	2014

Transaction ID : SA11AI.48946

Amount of Each Receipt this Period

19.24

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

84.24

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:
(check only one)

PAGE 64 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. BELINDA D. CONRAD</p> <p>Mailing Address 3062 Pebble Court</p> <p>City Maumee State OH Zip Code 43537</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4/SYLVANIA Occupation TEACHER AIDE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 316.64</p>		<p>Date of Receipt 05 / 29 / 2014 Transaction ID : SA11AI.48947</p> <p>Amount of Each Receipt this Period 19.24</p>
<p>Full Name (Last, First, Middle Initial) B. WENDY R. CONWAY</p> <p>Mailing Address 1212 Jefferson St., SE Suite 300</p> <p>City Olympia State WA Zip Code 98501</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 220.00</p>		<p>Date of Receipt 05 / 09 / 2014 Transaction ID : SA11AI.48281</p> <p>Amount of Each Receipt this Period 25.00</p>
<p>Full Name (Last, First, Middle Initial) C. WENDY R. CONWAY</p> <p>Mailing Address 1212 Jefferson St., SE Suite 300</p> <p>City Olympia State WA Zip Code 98501</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 245.00</p>		<p>Date of Receipt 05 / 23 / 2014 Transaction ID : SA11AI.48316</p> <p>Amount of Each Receipt this Period 25.00</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		<p>69.24</p>
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

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

PAGE 65 OF 403

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. SHARON M. CORKINMailing Address 4106 Terrace Street
#5

City	State	Zip Code
Oakland	CA	94611

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME CA CN 57/EAST BAY PARKS

Occupation

MAINTENANCE 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
05	/	13	/	2014

Transaction ID : SA11AI.48470

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. SYLVIA Y. COSLOW

Mailing Address 1931 N 2nd Street

City	State	Zip Code
Harrisburg	PA	17102

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13/STATE OF PA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	30	/	2014

Transaction ID : SA11AI.48750

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. BARBARA COUFAL

Mailing Address 10112 Parkwood Drive

City	State	Zip Code
Bethesda	MD	20814

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, FED GOVT AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

483.39

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	15	/	2014

Transaction ID : SA11AI.47047

Amount of Each Receipt this Period

53.71

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

133.71

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 66 OF 403
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. BARBARA COUFAL</p> <p>Mailing Address 10112 Parkwood Drive</p> <p>City State Zip Code Bethesda MD 20814</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L ASSISTANT DIRECTOR, FED GOVT AFFAIRS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 537.10</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47473 </p> <p>Amount of Each Receipt this Period 53.71</p>
<p>Full Name (Last, First, Middle Initial) B. CHRISTOPHER COWEN</p> <p>Mailing Address 47 Douglas Street</p> <p>City State Zip Code Saint Paul MN 55102</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MN CN 5/CN14 BUSINESS REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 365.04</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 06 / 2014 Transaction ID : SA11AI.48589 </p> <p>Amount of Each Receipt this Period 73.12</p>
<p>Full Name (Last, First, Middle Initial) C. HELEN E. COX</p> <p>Mailing Address 1130 Kirkwood Avenue SE</p> <p>City State Zip Code Atlanta GA 30316</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L STRATEGIC COMMUNICATIONS SPECIALIS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 258.93</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47048 </p> <p>Amount of Each Receipt this Period 28.77</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		155.60
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

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

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

FOR LINE NUMBER: PAGE 67 OF 403

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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 (Last, First, Middle Initial)

A. HELEN E. COX

Mailing Address 1130 Kirkwood Avenue SE

City State Zip Code
Atlanta GA 30316

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

STRATEGIC COMMUNICATIONS SPECIALIS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.70

Date of Receipt

05 / 27 / 2014

Transaction ID : SA11AI.47474

Amount of Each Receipt this Period

28.77

Full Name (Last, First, Middle Initial)

B. ALICIA M. CRAIG

Mailing Address 181 Sunnyside Avenue

City State Zip Code
New Castle PA 16102

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13/NSP.LOCAL 2902

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

05 / 12 / 2014

Transaction ID : SA11AI.47371

Amount of Each Receipt this Period

56.00

Full Name (Last, First, Middle Initial)

C. CARLOS CROSS

Mailing Address 1034 N. Washington Avenue

City State Zip Code
Lansing MI 48906

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.96

Date of Receipt

05 / 08 / 2014

Transaction ID : SA11AI.48198

Amount of Each Receipt this Period

29.12

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

113.89

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:
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PAGE 68 OF 403

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. CARLOS CROSS

Mailing Address 1034 N. Washington Avenue

City	State	Zip Code
Lansing	MI	48906

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.08

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	1	4

Transaction ID : SA11AI.48221

Amount of Each Receipt this Period

29.12

Full Name (Last, First, Middle Initial)

B. JAMES B. CULLENMailing Address 126 Central Square
Apt. 1

City	State	Zip Code
Pittsburgh	PA	15228

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSISTANT TO REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.52

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	1	4

Transaction ID : SA11AI.47049

Amount of Each Receipt this Period

52.28

Full Name (Last, First, Middle Initial)

C. JAMES B. CULLENMailing Address 126 Central Square
Apt. 1

City	State	Zip Code
Pittsburgh	PA	15228

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSISTANT TO REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

522.80

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	7		2	0	1	4

Transaction ID : SA11AI.47475

Amount of Each Receipt this Period

52.28

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

133.68

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

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

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 69 OF 403

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

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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. DEBORAH CURRIE

Mailing Address 4031 Executive Park Drive

City State Zip Code
Harrisburg PA 17111

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.00

Date of Receipt

05 / 12 / 2014

Transaction ID : SA11AI.47268

Amount of Each Receipt this Period

68.40

Full Name (Last, First, Middle Initial)

B. SEAN C. DAHL

Mailing Address 325 Amesbury Drive

City State Zip Code
Columbus OH 43230

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.93

Date of Receipt

05 / 12 / 2014

Transaction ID : SA11AI.48039

Amount of Each Receipt this Period

30.77

Full Name (Last, First, Middle Initial)

C. SEAN C. DAHL

Mailing Address 325 Amesbury Drive

City State Zip Code
Columbus OH 43230

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.70

Date of Receipt

05 / 27 / 2014

Transaction ID : SA11AI.48091

Amount of Each Receipt this Period

30.77

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

129.94

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 70 OF 403
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. SEAN C. DAHL</p> <p>Mailing Address 325 Amesbury Drive</p> <p>City State Zip Code Columbus OH 43230</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4 FIELD REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 378.47</p>			<p>Date of Receipt 05 / 29 / 2014 Transaction ID : SA11AI.48143 </p> <p>Amount of Each Receipt this Period 30.77</p>	
<p>Full Name (Last, First, Middle Initial) B. JIM A. DAHLING</p> <p>Mailing Address 66983 403rd Avenue</p> <p>City State Zip Code Goodhue MN 55027</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MN CN 65 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 381.30</p>			<p>Date of Receipt 05 / 01 / 2014 Transaction ID : SA11AI.48439 </p> <p>Amount of Each Receipt this Period 72.26</p>	
<p>Full Name (Last, First, Middle Initial) C. JIM A. DAHLING</p> <p>Mailing Address 66983 403rd Avenue</p> <p>City State Zip Code Goodhue MN 55027</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MN CN 65 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 453.56</p>			<p>Date of Receipt 05 / 30 / 2014 Transaction ID : SA11AI.48448 </p> <p>Amount of Each Receipt this Period 72.26</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			175.29	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 71 OF 403

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

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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. JEFFREY DAINS

Mailing Address 1743 Carl Street

City

Roseville

State

MN

Zip Code

55113

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MN CN 5/CN14

Occupation

BUSINESS REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 06 / 2014

Transaction ID : SA11AI.48591

Amount of Each Receipt this Period

54.00

Full Name (Last, First, Middle Initial)

B. WILLIAM DANDO

Mailing Address 6630 Huntingdon Street

City

Harrisburg

State

PA

Zip Code

17111

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

ASSOCIATE LEGISLATIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

996.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 12 / 2014

Transaction ID : SA11AI.47269

Amount of Each Receipt this Period

199.32

Full Name (Last, First, Middle Initial)

C. JAMES D. DANNEN

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

AFSCME WA CN 28

Occupation

COUNCIL 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
05 / 13 / 2014

Transaction ID : SA11AI.48317

Amount of Each Receipt this Period

42.00

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)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 72 OF 403

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

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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. SEAN DANNEN

Mailing Address P.O. Box 7472

City

Tacoma

State

WA

Zip Code

98417

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME WA CN 28

Occupation

COUNCIL REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

220.00

Date of Receipt

05 / 13 / 2014

Transaction ID : SA11AI.48318

Amount of Each Receipt this Period

44.00

Full Name (Last, First, Middle Initial)

B. KIMBERLY A. DAVANZO

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

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

249.25

Date of Receipt

05 / 12 / 2014

Transaction ID : SA11AI.47271

Amount of Each Receipt this Period

77.78

Full Name (Last, First, Middle Initial)

C. SARA DAVIES

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

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

209.48

Date of Receipt

05 / 12 / 2014

Transaction ID : SA11AI.47272

Amount of Each Receipt this Period

45.24

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

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

167.02

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 403

(check only one)

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

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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. GREGORY N. DAVIS

Mailing Address 53737 Heineman Road E.

City	State	Zip Code
Edwall	WA	99008

FEC ID number of contributing federal political committee.

Name of Employer

AFSCME WA CN 28

Occupation

COUNCIL 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
05	/	13	/	2014

Transaction ID : SA11AI.48319

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

B. GREGORY N. DAVIS

Mailing Address 53737 Heineman Road E.

City	State	Zip Code
Edwall	WA	99008

FEC ID number of contributing federal political committee.

Name of Employer

AFSCME WA CN 28

Occupation

COUNCIL 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
05	/	13	/	2014

Transaction ID : SA11AI.48364

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. GREGORY N. DAVIS

Mailing Address 53737 Heineman Road E.

City	State	Zip Code
Edwall	WA	99008

FEC ID number of contributing federal political committee.

Name of Employer

AFSCME WA CN 28

Occupation

COUNCIL 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
05	/	23	/	2014

Transaction ID : SA11AI.48365

Amount of Each Receipt this Period

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:
 (check only one)

PAGE 74 OF 403

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. MARK R. DAVIS

Mailing Address 14724 Armin Avenue

City

Lakewood

State

OH

Zip Code

44107

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH CN 8

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

446.76

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	06	/	2014

Transaction ID : SA11AI.47799

Amount of Each Receipt this Period

89.88

Full Name (Last, First, Middle Initial)

B. ROBERT A. DAVIS

Mailing Address 822 Bovee Lane

City

Powell

State

OH

Zip Code

43065

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH CN 8

Occupation

ASSOCIATE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.72

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	06	/	2014

Transaction ID : SA11AI.47800

Amount of Each Receipt this Period

87.58

Full Name (Last, First, Middle Initial)

C. ROBERT DAVIS

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

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.96

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	08	/	2014

Transaction ID : SA11AI.48199

Amount of Each Receipt this Period

29.12

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

206.58

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 75 OF 403

(check only one)

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

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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. ROBERT DAVIS

Mailing Address 1034 N. Washington Avenue

City State Zip Code
 Lansing MI 48906

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.08

Date of Receipt

05 / 21 / 2014

Transaction ID : SA11AI.48222

Amount of Each Receipt this Period

29.12

Full Name (Last, First, Middle Initial)

B. EDGAR DEJESUS

Mailing Address 8 Ralph Street
 First Floor

City State Zip Code
 Bergenfield NJ 07621-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

AREA ORGANIZING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

711.90

Date of Receipt

05 / 15 / 2014

Transaction ID : SA11AI.47051

Amount of Each Receipt this Period

79.10

Full Name (Last, First, Middle Initial)

C. EDGAR DEJESUS

Mailing Address 8 Ralph Street
 First Floor

City State Zip Code
 Bergenfield NJ 07621-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

AREA ORGANIZING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

791.00

Date of Receipt

05 / 27 / 2014

Transaction ID : SA11AI.47477

Amount of Each Receipt this Period

79.10

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

187.32

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 76 OF 403
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. KENNETH DELORENZO</p> <p>Mailing Address 1179 Charles Street</p> <p>City State Zip Code North Providence RI 02904</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME RI CN 94 EXECUTIVE DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 338.40</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 14 / 2014 Transaction ID : SA11AI.48426</p> <p>Amount of Each Receipt this Period 84.60</p>
<p>Full Name (Last, First, Middle Initial) B. JOSEPH DELOREY</p> <p>Mailing Address 8 Beacon Street</p> <p>City State Zip Code Boston MA 02108-0000</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MA CN 93 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 208.30</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 08 / 2014 Transaction ID : SA11AI.48494</p> <p>Amount of Each Receipt this Period 41.66</p>
<p>Full Name (Last, First, Middle Initial) C. MICHAEL A. DELUKE</p> <p>Mailing Address 844 Manchester Avenue</p> <p>City State Zip Code Kent OH 44240</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH CN 8 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 320.50</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 06 / 2014 Transaction ID : SA11AI.47801</p> <p>Amount of Each Receipt this Period 64.40</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		190.66
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

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 403
(check only one)

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

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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. CHRISTIE J. DENNIS-SHERRARD

Mailing Address 4320 NW Second Avenue

City State Zip Code
Des Moines IA 50313

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME IA CN 61/STATE OF IA

Occupation
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
05 / 14 / 2014

Transaction ID : SA11AI.47763

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. CONSTANCE DERR

Mailing Address 111 Ranchitos

City State Zip Code
Corrales NM 87048

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation
AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.47052

Amount of Each Receipt this Period

52.50

Full Name (Last, First, Middle Initial)

C. CONSTANCE DERR

Mailing Address 111 Ranchitos

City State Zip Code
Corrales NM 87048

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation
AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

472.50

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.47478

Amount of Each Receipt this Period

52.50

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

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

155.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 78 OF 403

(check only one)

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

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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. GREG D. DEVEREUX

Mailing Address 3561 Kamilche Point Road

City	State	Zip Code
Shelton	WA	98584

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME WA CN 28

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

656.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	13	/	2014

Transaction ID : SA11AI.48320

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

B. GREG D. DEVEREUX

Mailing Address 3561 Kamilche Point Road

City	State	Zip Code
Shelton	WA	98584

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME WA CN 28

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

670.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	27	/	2014

Transaction ID : SA11AI.48371

Amount of Each Receipt this Period

14.00

Full Name (Last, First, Middle Initial)

C. WILLIAM A. DEVORE

Mailing Address 4499 Stover Road

City	State	Zip Code
Ostrander	OH	43061

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME OH CN 8

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	06	/	2014

Transaction ID : SA11AI.47802

Amount of Each Receipt this Period

64.40

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

198.40

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:
(check only one)

PAGE 79 OF 403

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

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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. JASON DIBBLE

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

AFSCME MN CN 5/STATE OF MN

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

935.00

Date of Receipt

05 / 28 / 2014

Transaction ID : SA11AI.47863

Amount of Each Receipt this Period

170.00

Full Name (Last, First, Middle Initial)

B. CRYSTAL M. DI DOMENICO

Mailing Address 38426 Village Lane

City

Mechanicsville

State

MD

Zip Code

20659

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

MANAGER, HUMAN RESOURCES

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

359.10

Date of Receipt

05 / 15 / 2014

Transaction ID : SA11AI.47053

Amount of Each Receipt this Period

39.90

Full Name (Last, First, Middle Initial)

C. CRYSTAL M. DI DOMENICO

Mailing Address 38426 Village Lane

City

Mechanicsville

State

MD

Zip Code

20659

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

MANAGER, HUMAN RESOURCES

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

399.00

Date of Receipt

05 / 27 / 2014

Transaction ID : SA11AI.47479

Amount of Each Receipt this Period

39.90

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

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

249.80

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

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

FOR LINE NUMBER:
(check only one)

PAGE 80 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. JEAN M. DIEDERICH</p> <p>Mailing Address 4741 Grand Ave. So. No. 3</p> <p>City State Zip Code Minneapolis MN 55419-5443</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MN CN 5/HENNEPIN COUNTY CHILD SUPPORT OFFICER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1076.00</p>			<p>Date of Receipt 05 / 02 / 2014</p> <p>Transaction ID : SA11AI.47883</p> <p>Amount of Each Receipt this Period 240.00</p>	
<p>Full Name (Last, First, Middle Initial) B. JEAN M. DIEDERICH</p> <p>Mailing Address 4741 Grand Ave. So. No. 3</p> <p>City State Zip Code Minneapolis MN 55419-5443</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MN CN 5/HENNEPIN COUNTY CHILD SUPPORT OFFICER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1316.00</p>			<p>Date of Receipt 05 / 29 / 2014</p> <p>Transaction ID : SA11AI.47884</p> <p>Amount of Each Receipt this Period 240.00</p>	
<p>Full Name (Last, First, Middle Initial) C. RACHEL DIETZ</p> <p>Mailing Address 1332 Fulton Street</p> <p>City State Zip Code Harrisburg PA 17102</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME PA CN 13 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 247.00</p>			<p>Date of Receipt 05 / 12 / 2014</p> <p>Transaction ID : SA11AI.47273</p> <p>Amount of Each Receipt this Period 49.40</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			529.40	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

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

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

FOR LINE NUMBER:
(check only one)

PAGE 81 OF 403

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

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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. JEANETTE DIFLORIO

Mailing Address 4296 Merriman Loop

City

Howell

State

MI

Zip Code

48843

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.32

Date of Receipt

05 / 08 / 2014

Transaction ID : SA11AI.48200

Amount of Each Receipt this Period

30.29

Full Name (Last, First, Middle Initial)

B. JEANETTE DIFLORIO

Mailing Address 4296 Merriman Loop

City

Howell

State

MI

Zip Code

48843

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.61

Date of Receipt

05 / 21 / 2014

Transaction ID : SA11AI.48223

Amount of Each Receipt this Period

30.29

Full Name (Last, First, Middle Initial)

C. LISA DIVITTORE

Mailing Address 4031 Executive Park Drive

City

Harrisburg

State

PA

Zip Code

17111

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.00

Date of Receipt

05 / 12 / 2014

Transaction ID : SA11AI.47274

Amount of Each Receipt this Period

59.60

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

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

120.18

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

PAGE 82 OF 403

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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. KEVIN DOEING

Mailing Address 316 Quittie Park Drive

City	State	Zip Code
Annvile	PA	17003

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

418.60

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	1	4

Transaction ID : SA11AI.47275

Amount of Each Receipt this Period

83.72

Full Name (Last, First, Middle Initial)

B. MICHAEL J. DOLNEY JR.Mailing Address 105 Pacific Avenue
P.O. Box 71

City	State	Zip Code
Randall	MN	56475

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MN CN 5/STATE OF MN

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	1	4

Transaction ID : SA11AI.47864

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. LORI DONALDSON

Mailing Address 419 1/2 Grant Street

City	State	Zip Code
Franklin	PA	16323

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	1	4

Transaction ID : SA11AI.47276

Amount of Each Receipt this Period

49.40

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

173.12

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 83 OF 403

(check only one)

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

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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. DANNY DONOHUE

Mailing Address 10 Longview Drive

City State Zip Code
 Clifton Park NY 12061

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME NY LOC 1000

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.16

Date of Receipt

05 / 01 / 2014

Transaction ID : SA11AI.48892

Amount of Each Receipt this Period

19.24

Full Name (Last, First, Middle Initial)

B. DANNY DONOHUE

Mailing Address 10 Longview Drive

City State Zip Code
 Clifton Park NY 12061

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME NY LOC 1000

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.40

Date of Receipt

05 / 15 / 2014

Transaction ID : SA11AI.48893

Amount of Each Receipt this Period

19.24

Full Name (Last, First, Middle Initial)

C. DANNY DONOHUE

Mailing Address 10 Longview Drive

City State Zip Code
 Clifton Park NY 12061

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME NY LOC 1000

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.40

Date of Receipt

05 / 27 / 2014

Transaction ID : SA11AI.48372

Amount of Each Receipt this Period

14.00

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:
(check only one)

PAGE 84 OF 403

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

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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. DANNY DONOHUE

Mailing Address 10 Longview Drive

City State Zip Code
Clifton Park NY 12061

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME NY LOC 1000

Occupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.64

Date of Receipt

05 / 29 / 2014

Transaction ID : SA11AI.48894

Amount of Each Receipt this Period

19.24

Full Name (Last, First, Middle Initial)

B. THOMAS C. DRABICK JR.

Mailing Address 982 Fortkort Drive

City State Zip Code
Reynoldsburg OH 43068

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 4

Occupation
DIRECTOR, LEGAL SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

05 / 12 / 2014

Transaction ID : SA11AI.49049

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. THOMAS C. DRABICK JR.

Mailing Address 982 Fortkort Drive

City State Zip Code
Reynoldsburg OH 43068

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 4

Occupation
DIRECTOR, LEGAL SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

05 / 27 / 2014

Transaction ID : SA11AI.48093

Amount of Each Receipt this Period

20.00

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

79.24

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 85 OF 403
 (check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 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. THOMAS C. DRABICK JR. Full Name (Last, First, Middle Initial) Mailing Address 982 Fortkort Drive City Reynoldsburg State OH Zip Code 43068 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH LOC 4 Occupation DIRECTOR, LEGAL SERVICES Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00			Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> M M / D D / Y Y Y Y Y </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> 05 / 29 / 2014 </div> Transaction ID : SA11AI.48145 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 20.00 </div>	
B. JAMES W DURKIN Full Name (Last, First, Middle Initial) Mailing Address 8 Beacon Street City Boston State MA Zip Code 02108-0000 FEC ID number of contributing federal political committee. C Name of Employer AFSCME MA CN 93 Occupation COMMUNICATIONS SPECIALIST Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> M M / D D / Y Y Y Y Y </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> 05 / 08 / 2014 </div> Transaction ID : SA11AI.48495 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 50.00 </div>	
C. DENNIS J. EAGLE Full Name (Last, First, Middle Initial) 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 AFSCME WA CN 28 Occupation DIRECTOR OF LPA Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00			Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> M M / D D / Y Y Y Y Y </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> 05 / 13 / 2014 </div> Transaction ID : SA11AI.48321 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 90.00 </div>	
SUBTOTAL of Receipts This Page (optional)..... ▶			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 160.00 </div>	
TOTAL This Period (last page this line number only)..... ▶			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> </div>	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

 FOR LINE NUMBER:
 (check only one)

PAGE 86 OF 403

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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. LAURIE ECKELS

Mailing Address 42 Profio Road

City	State	Zip Code
McDonald	PA	15057

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.90

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	1	4

Transaction ID : SA11AI.47277

Amount of Each Receipt this Period

77.78

Full Name (Last, First, Middle Initial)

B. PATRICIA A. EDWARDS

Mailing Address 720 Mox Chehalis Road

City	State	Zip Code
McCleary	WA	98557

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	1	4

Transaction ID : SA11AI.48322

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

C. GARTH A. EHLINGER

Mailing Address 2793 Possum Run Road

City	State	Zip Code
Mansfield	OH	44903

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME OH LOC 11

Occupation

INSURANCE CONTRACT ANALYST V

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	4		2	0	1	4

Transaction ID : SA11AI.47389

Amount of Each Receipt this Period

500.00

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

598.78

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:
(check only one)

PAGE 87 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. LAURA M. ELLIS</p> <p>Mailing Address 7711 Sessis Drive</p> <p>City State Zip Code Worthington OH 43085</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L FIELD ADMINISTRATIVE ASSISTANT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 229.77</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47057</p> <p>Amount of Each Receipt this Period 25.53</p>	
<p>Full Name (Last, First, Middle Initial) B. LAURA M. ELLIS</p> <p>Mailing Address 7711 Sessis Drive</p> <p>City State Zip Code Worthington OH 43085</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L FIELD ADMINISTRATIVE ASSISTANT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 255.30</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47483</p> <p>Amount of Each Receipt this Period 25.53</p>	
<p>Full Name (Last, First, Middle Initial) C. DARYL ERICKSON</p> <p>Mailing Address 240 Parkridge Road</p> <p>City State Zip Code Mason City IA 50401</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME IA CN 61/STATE OF IA STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 204.20</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 20 / 2014 Transaction ID : SA11AI.47782</p> <p>Amount of Each Receipt this Period 40.84</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			91.90	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

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

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

FOR LINE NUMBER:
(check only one)

PAGE 88 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. KURT ERRICKSON</p> <p>Mailing Address 224 No. Smith Avenue Apt. #12</p> <p>City Saint Paul State MN Zip Code 55102</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME MN CN 5/CN14 Occupation BUSINESS MANAGER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 365.04</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 06 / 2014</p> <p>Transaction ID : SA11AI.48592</p> <p>Amount of Each Receipt this Period 73.12</p>
<p>Full Name (Last, First, Middle Initial) B. GEORGE ESTRIGHT</p> <p>Mailing Address 4031 Executive Park Drive</p> <p>City Harrisburg State PA Zip Code 17111</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 362.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014</p> <p>Transaction ID : SA11AI.47278</p> <p>Amount of Each Receipt this Period 68.40</p>
<p>Full Name (Last, First, Middle Initial) C. MICHELLE R. EVANS</p> <p>Mailing Address 10201 Galena Pointe Drive</p> <p>City Galena State OH Zip Code 43021</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH CN 8 Occupation STAFF ATTORNEY</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 338.10</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 06 / 2014</p> <p>Transaction ID : SA11AI.47803</p> <p>Amount of Each Receipt this Period 68.02</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		<p>209.54</p>
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

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

PAGE 89 OF 403

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

A. SUSAN E. EVERETTS Full Name (Last, First, Middle Initial) Mailing Address 2704 Bella Via Avenue City Columbus State OH Zip Code 43231 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH LOC 4 Occupation ACCOUNT CLERK Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 213.07		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.49064 Amount of Each Receipt this Period 40.00
B. SUSAN E. EVERETTS Full Name (Last, First, Middle Initial) Mailing Address 2704 Bella Via Avenue City Columbus State OH Zip Code 43231 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH LOC 4 Occupation ACCOUNT CLERK Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 263.07		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 20 / 2014 Transaction ID : SA11AI.49065 Amount of Each Receipt this Period 50.00
C. SUSAN E. EVERETTS Full Name (Last, First, Middle Initial) Mailing Address 2704 Bella Via Avenue City Columbus State OH Zip Code 43231 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH LOC 4 Occupation ACCOUNT CLERK Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 293.07		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 20 / 2014 Transaction ID : SA11AI.49066 Amount of Each Receipt this Period 30.00
SUBTOTAL of Receipts This Page (optional)..... ▶		120.00
TOTAL This Period (last page this line number only)..... ▶		

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

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

FOR LINE NUMBER:
(check only one)

PAGE 90 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 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. SUSAN E. EVERETTS Full Name (Last, First, Middle Initial) Mailing Address 2704 Bella Via Avenue City Columbus State OH Zip Code 43231 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH LOC 4 Occupation ACCOUNT CLERK Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 312.30		Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.48094 Amount of Each Receipt this Period 19.23
B. SUSAN E. EVERETTS Full Name (Last, First, Middle Initial) Mailing Address 2704 Bella Via Avenue City Columbus State OH Zip Code 43231 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH LOC 4 Occupation ACCOUNT CLERK Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 331.53		Date of Receipt M M / D D / Y Y Y Y Y 05 / 29 / 2014 Transaction ID : SA11AI.48146 Amount of Each Receipt this Period 19.23
C. MARY FALK Full Name (Last, First, Middle Initial) 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 AFSCME MN CN 5/STATE OF MN Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 385.00		Date of Receipt M M / D D / Y Y Y Y Y 05 / 28 / 2014 Transaction ID : SA11AI.47865 Amount of Each Receipt this Period 70.00
SUBTOTAL of Receipts This Page (optional)..... ▶		108.46
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 PageFOR LINE NUMBER:
(check only one)

PAGE 91 OF 403

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. ROBERT FANTAUZZO

Mailing Address 6805 Oak Creek Drive

City	State	Zip Code
Columbus	OH	43229

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.93

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	12	/	2014

Transaction ID : SA11AI.48043

Amount of Each Receipt this Period

30.77

Full Name (Last, First, Middle Initial)

B. ROBERT FANTAUZZO

Mailing Address 6805 Oak Creek Drive

City	State	Zip Code
Columbus	OH	43229

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.70

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	27	/	2014

Transaction ID : SA11AI.48095

Amount of Each Receipt this Period

30.77

Full Name (Last, First, Middle Initial)

C. ROBERT FANTAUZZO

Mailing Address 6805 Oak Creek Drive

City	State	Zip Code
Columbus	OH	43229

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.47

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	29	/	2014

Transaction ID : SA11AI.48147

Amount of Each Receipt this Period

30.77

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

92.31

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 92 OF 403

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

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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. STEPHAN FANTAUZZO

Mailing Address 4415 Fessenden Street NW

City State Zip Code
 Washington DC 20016

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

CHIEF OF STAFF TO THE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

991.71

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 15 / 2014

Transaction ID : SA11AI.47058

Amount of Each Receipt this Period

110.19

Full Name (Last, First, Middle Initial)

B. STEPHAN FANTAUZZO

Mailing Address 4415 Fessenden Street NW

City State Zip Code
 Washington DC 20016

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

CHIEF OF STAFF TO THE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1101.90

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 27 / 2014

Transaction ID : SA11AI.47484

Amount of Each Receipt this Period

110.19

Full Name (Last, First, Middle Initial)

C. RICHARD M. FELLER

Mailing Address 5480 Wisconsin Avenue
 Apt. 1017

City State Zip Code
 Chevy Chase MD 20815

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, POLITICAL ACTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

524.25

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 15 / 2014

Transaction ID : SA11AI.47060

Amount of Each Receipt this Period

58.25

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

278.63

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 93 OF 403

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. RICHARD M. FELLER
 Mailing Address 5480 Wisconsin Avenue
 Apt. 1017

City	State	Zip Code
Chevy Chase	MD	20815

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, POLITICAL ACTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

582.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	27	/	2014

Transaction ID : SA11AI.47486

Amount of Each Receipt this Period

58.25

Full Name (Last, First, Middle Initial)

B. ANGELA FERRITTO

Mailing Address 1053 Newton Avenue

City	State	Zip Code
Erie	PA	16511

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.46

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	12	/	2014

Transaction ID : SA11AI.47280

Amount of Each Receipt this Period

47.64

Full Name (Last, First, Middle Initial)

C. GERALD F. FIDLER

Mailing Address 7123 Falcon Street

City	State	Zip Code
Annadale	VA	22003

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

POLITICAL ACTION REPRESENTATIVE III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

442.98

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	15	/	2014

Transaction ID : SA11AI.47061

Amount of Each Receipt this Period

49.22

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

155.11

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 94 OF 403
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. GERALD F. FIDLER

Mailing Address 7123 Falcon Street

City	State	Zip Code
Annadale	VA	22003

FEC ID number of contributing federal political committee.

Name of Employer

AFSCME INT'L

Occupation

POLITICAL ACTION REPRESENTATIVE III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	27	/	2014

Transaction ID : SA11AI.47487

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

B. JOHN J. FILAK Jr.

Mailing Address 6160 Clingan Road

City	State	Zip Code
Poland	OH	44514

FEC ID number of contributing federal political committee.

Name of Employer

AFSCME OH CN 8

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	06	/	2014

Transaction ID : SA11AI.47804

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. DAVID FILLMAN

Mailing Address 2520 Helen Street

City	State	Zip Code
Hatboro	PA	19040

FEC ID number of contributing federal political committee.

Name of Employer

AFSCME PA CN 13

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	12	/	2014

Transaction ID : SA11AI.47281

Amount of Each Receipt this Period

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:
(check only one)

PAGE 95 OF 403

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

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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. DAVID FILLMAN

Mailing Address 2520 Helen Street

City State Zip Code
Hatboro PA 19040

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

871.57

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.48373

Amount of Each Receipt this Period

14.00

Full Name (Last, First, Middle Initial)

B. GERALD FIRKUS

Mailing Address 44935 Deerfield Road

City State Zip Code
Sturgeon Lake MN 55783-3616

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MN CN 5/STATE OF MN

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.07

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 28 / 2014

Transaction ID : SA11AI.47866

Amount of Each Receipt this Period

40.74

Full Name (Last, First, Middle Initial)

C. CHRISTOPHER C. FLEMING

Mailing Address 2351 Huntington Station Court

City State Zip Code
Alexandria VA 22303

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSISTANT DIRECTOR MEDIA OUTREACH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

411.03

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.47062

Amount of Each Receipt this Period

45.67

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

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

100.41

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. 02/2003

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

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

FOR LINE NUMBER: PAGE 97 OF 403

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. NANETTE M. FOLSOM</p> <p>Mailing Address 5631 Swan Avenue ne</p> <p>City State Zip Code North Canton OH 44721</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4 FIELD REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 610.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.47401</p> <p>Amount of Each Receipt this Period 50.00</p>	
<p>Full Name (Last, First, Middle Initial) B. NANETTE M. FOLSOM</p> <p>Mailing Address 5631 Swan Avenue ne</p> <p>City State Zip Code North Canton OH 44721</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4 FIELD REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 660.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.47406</p> <p>Amount of Each Receipt this Period 50.00</p>	
<p>Full Name (Last, First, Middle Initial) C. NANETTE M. FOLSOM</p> <p>Mailing Address 5631 Swan Avenue ne</p> <p>City State Zip Code North Canton OH 44721</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4 FIELD REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 685.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.48044</p> <p>Amount of Each Receipt this Period 25.00</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>125.00</p>	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

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

PAGE 98 OF 403

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

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NAME OF COMMITTEE (In Full)

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

A. NANETTE M. FOLSOM Full Name (Last, First, Middle Initial) Mailing Address 5631 Swan Avenue ne City North Canton State OH Zip Code 44721 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 710.00		Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.48096 Amount of Each Receipt this Period 25.00
B. NANETTE M. FOLSOM Full Name (Last, First, Middle Initial) Mailing Address 5631 Swan Avenue ne City North Canton State OH Zip Code 44721 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 735.00		Date of Receipt M M / D D / Y Y Y Y Y 05 / 29 / 2014 Transaction ID : SA11AI.48148 Amount of Each Receipt this Period 25.00
C. JEFFREY S. FOWLER Full Name (Last, First, Middle Initial) Mailing Address 7664 Hinton Avenue South Apt. #9 City Cottage Grove State MN Zip Code 55016 FEC ID number of contributing federal political committee. C Name of Employer AFSCME MN CN 5/CN14 Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 280.88		Date of Receipt M M / D D / Y Y Y Y Y 05 / 06 / 2014 Transaction ID : SA11AI.48594 Amount of Each Receipt this Period 57.12
SUBTOTAL of Receipts This Page (optional)..... ▶		107.12
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:
(check only one)

PAGE 99 OF 403

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

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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. MICHAEL E. FOX

Mailing Address 3818 Sheffield Lane

City

Harrisburg

State

PA

Zip Code

17110-3044

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

COUNCIL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1454.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 12 / 2014

Transaction ID : SA11AI.47283

Amount of Each Receipt this Period

234.84

Full Name (Last, First, Middle Initial)

B. MICHAEL E. FOX

Mailing Address 3818 Sheffield Lane

City

Harrisburg

State

PA

Zip Code

17110-3044

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

COUNCIL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1524.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.48374

Amount of Each Receipt this Period

70.00

Full Name (Last, First, Middle Initial)

C. SUZANNE M. FOX

Mailing Address 4200 Chestnut Hills Road

City

Newark

State

OH

Zip Code

43055

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/NEWARK CITY

Occupation

EDUCATIONAL/TEACHER AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.58

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 20 / 2014

Transaction ID : SA11AI.48952

Amount of Each Receipt this Period

50.00

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

354.84

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 100 OF 403
(check only one)

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

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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. SUZANNE M. FOX

Mailing Address 4200 Chestnut Hills Road

City State Zip Code
Newark OH 43055

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/NEWARK CITY

Occupation

EDUCATIONAL/TEACHER AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.20

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.48953

Amount of Each Receipt this Period

9.62

Full Name (Last, First, Middle Initial)

B. WALTER FRANCIS

Mailing Address 1002 Cypress Road

City State Zip Code
Wilmington DE 19810

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.50

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 12 / 2014

Transaction ID : SA11AI.47284

Amount of Each Receipt this Period

73.90

Full Name (Last, First, Middle Initial)

C. STEVEN M. FRANCY

Mailing Address 12 Belmont Court

City State Zip Code
Silver Spring MD 20910

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

409.32

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.47063

Amount of Each Receipt this Period

45.48

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

129.00

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:
(check only one)

PAGE 101 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. STEVEN M. FRANCY</p> <p>Mailing Address 12 Belmont Court</p> <p>City State Zip Code Silver Spring MD 20910</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L COORDINATOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 454.80</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47489</p> <p>Amount of Each Receipt this Period 45.48</p>
<p>Full Name (Last, First, Middle Initial) B. GARETH J. FRANK</p> <p>Mailing Address 2309 Parkway</p> <p>City State Zip Code Cheverly MD 20785</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L/STATE STREET RETIREE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 387.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 01 / 2014 Transaction ID : SA11AI.47412</p> <p>Amount of Each Receipt this Period 77.40</p>
<p>Full Name (Last, First, Middle Initial) C. MARK J. FRYMOYER</p> <p>Mailing Address 518 Reuel Avenue</p> <p>City State Zip Code Kellogg IA 50134</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME IA CN 61 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 400.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 08 / 2014 Transaction ID : SA11AI.48866</p> <p>Amount of Each Receipt this Period 80.00</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		202.88
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

FOR LINE NUMBER: (check only one)		PAGE 102 OF 403	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 103 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. JOHN GALUSKA</p> <p>Mailing Address 205 Green Vista Drive</p> <p>City State Zip Code Pittsburgh PA 15237</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME PA CN 13 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 369.50</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.47286</p> <p>Amount of Each Receipt this Period 73.90</p>	
<p>Full Name (Last, First, Middle Initial) B. PAUL H. GAMMEL</p> <p>Mailing Address 47390 Acacia Trail</p> <p>City State Zip Code Stanchfield MN 55080</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MN CN 5/STATE OF MN STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 220.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 28 / 2014 Transaction ID : SA11AI.47867</p> <p>Amount of Each Receipt this Period 40.00</p>	
<p>Full Name (Last, First, Middle Initial) C. DEBRA L. GARCIA</p> <p>Mailing Address 449 College Avenue</p> <p>City State Zip Code Richmond IN 47374</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L AREA FIELD SERVICES DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 503.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47066</p> <p>Amount of Each Receipt this Period 60.36</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>174.26</p>	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

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

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

FOR LINE NUMBER:
(check only one)

PAGE 104 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. DEBRA L. GARCIA</p> <p>Mailing Address 449 College Avenue</p> <p>City State Zip Code Richmond IN 47374</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L AREA FIELD SERVICES DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 564.72</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47492</p> <p>Amount of Each Receipt this Period 61.72</p>	
<p>Full Name (Last, First, Middle Initial) B. ALBERT GARRETT</p> <p>Mailing Address 18491 Lauder</p> <p>City State Zip Code Detroit MI 48232</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MI CN 25 PRESIDENT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 942.64</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 08 / 2014 Transaction ID : SA11AI.48201</p> <p>Amount of Each Receipt this Period 117.83</p>	
<p>Full Name (Last, First, Middle Initial) C. ALBERT GARRETT</p> <p>Mailing Address 18491 Lauder</p> <p>City State Zip Code Detroit MI 48232</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MI CN 25 PRESIDENT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1060.47</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 21 / 2014 Transaction ID : SA11AI.48224</p> <p>Amount of Each Receipt this Period 117.83</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>297.38</p>	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

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

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

FOR LINE NUMBER:
(check only one)

PAGE 105 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. ROBERT A. GARRETT</p> <p>Mailing Address 5621 Wigmore Drive</p> <p>City State Zip Code Columbus OH 43235</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH CN 8 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 258.76</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 06 / 2014 Transaction ID : SA11AI.47805</p> <p>Amount of Each Receipt this Period 51.98</p>
<p>Full Name (Last, First, Middle Initial) B. DAVID GASH</p> <p>Mailing Address 226 Hartley Road</p> <p>City State Zip Code Hershey PA 17033</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME PA CN 13 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 369.50</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.47287</p> <p>Amount of Each Receipt this Period 73.90</p>
<p>Full Name (Last, First, Middle Initial) C. MICHAEL J. GASS</p> <p>Mailing Address 6602 SE Sundancer</p> <p>City State Zip Code Pleasant Hill IA 50327</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME IA CN 61/STATE OF IA STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 250.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 14 / 2014 Transaction ID : SA11AI.47765</p> <p>Amount of Each Receipt this Period 25.00</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		<p>150.88</p>
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

 FOR LINE NUMBER: PAGE 106 OF 403
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. JENNIFER GEORGE

Mailing Address 201 North 36th Street

City

Camp Hill

State

PA

Zip Code

17011

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	1	4

Transaction ID : SA11AI.47288

Amount of Each Receipt this Period

49.40

Full Name (Last, First, Middle Initial)

B. RAGLAN GEORGE Jr.
Mailing Address 75 Varick Street
Suite #1404

City

New York

State

NY

Zip Code

10013-9902

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME NY CN 1707

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

453.04

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	7		2	0	1	4

Transaction ID : SA11AI.48375

Amount of Each Receipt this Period

14.00

Full Name (Last, First, Middle Initial)

C. RAGLAN GEORGE Jr.
Mailing Address 75 Varick Street
Suite #1404

City

New York

State

NY

Zip Code

10013-9902

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME NY CN 1707

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

572.74

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	1	4

Transaction ID : SA11AI.47895

Amount of Each Receipt this Period

119.70

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

183.10

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:
(check only one)

PAGE 107 OF 403

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

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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. THOMAS GIBBS

Mailing Address 152 Upper Clear Road

City
Claysburg

State Zip Code
PA 16625

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 12 / 2014

Transaction ID : SA11AI.47289

Amount of Each Receipt this Period

73.90

Full Name (Last, First, Middle Initial)

B. CRAIG W. GIBELYOU

Mailing Address 10905 132nd Street E

City
Puyallup

State Zip Code
WA 98374

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 09 / 2014

Transaction ID : SA11AI.48283

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. CRAIG W. GIBELYOU

Mailing Address 10905 132nd Street E

City
Puyallup

State Zip Code
WA 98374

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2014

Transaction ID : SA11AI.48323

Amount of Each Receipt this Period

25.00

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

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

123.90

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

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

FOR LINE NUMBER:
(check only one)

PAGE 108 OF 403

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

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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. CHERYL A. GIBSON

Mailing Address 4320 NW Second Avenue

City

Des Moines

State

IA

Zip Code

50313

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME IA CN 61/STATE OF IA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.20

Date of Receipt

05 / 14 / 2014

Transaction ID : SA11AI.47766

Amount of Each Receipt this Period

24.62

Full Name (Last, First, Middle Initial)

B. LENORA R. GILES

Mailing Address 40778 Boyd Road

City

Wellsville

State

OH

Zip Code

43968

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

05 / 12 / 2014

Transaction ID : SA11AI.48045

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. LENORA R. GILES

Mailing Address 40778 Boyd Road

City

Wellsville

State

OH

Zip Code

43968

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

05 / 20 / 2014

Transaction ID : SA11AI.49050

Amount of Each Receipt this Period

100.00

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

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

154.62

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

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

FOR LINE NUMBER:
(check only one)

PAGE 109 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. LENORA R. GILES</p> <p>Mailing Address 40778 Boyd Road</p> <p>City State Zip Code Wellsville OH 43968</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4 FIELD REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 400.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.48097</p> <p>Amount of Each Receipt this Period 30.00</p>
<p>Full Name (Last, First, Middle Initial) B. LENORA R. GILES</p> <p>Mailing Address 40778 Boyd Road</p> <p>City State Zip Code Wellsville OH 43968</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4 FIELD REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 430.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 29 / 2014 Transaction ID : SA11AI.48149</p> <p>Amount of Each Receipt this Period 30.00</p>
<p>Full Name (Last, First, Middle Initial) C. KAREN GILGOFF</p> <p>Mailing Address 5800 Nicholson Lane Apt. 502</p> <p>City State Zip Code Rockville MD 20852</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L ASST. DIRECTOR, RETIREES PROGRAM</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 619.81</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47069</p> <p>Amount of Each Receipt this Period 68.71</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		128.71
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

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

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

FOR LINE NUMBER:
(check only one)

PAGE 110 OF 403

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

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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. KAREN GILGOFF

Mailing Address 5800 Nicholson Lane
Apt. 502

City State Zip Code
Rockville MD 20852

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASST. DIRECTOR, RETIREES PROGRAM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

688.52

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.47495

Amount of Each Receipt this Period

68.71

Full Name (Last, First, Middle Initial)

B. DOROTHY L. GILLIAM

Mailing Address 1216 Waterford Drive

City State Zip Code
District Heights MD 20747

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

EXECUTIVE OFFICE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.55

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.47070

Amount of Each Receipt this Period

39.95

Full Name (Last, First, Middle Initial)

C. DOROTHY L. GILLIAM

Mailing Address 1216 Waterford Drive

City State Zip Code
District Heights MD 20747

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

EXECUTIVE OFFICE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.50

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.47496

Amount of Each Receipt this Period

39.95

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

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

148.61

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

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

FOR LINE NUMBER:
(check only one)

PAGE 111 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. STEVE GIORGI</p> <p>Mailing Address 8386 Gardenia Street</p> <p>City State Zip Code Virginia MN 55792</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MN CN 65 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 461.70</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 01 / 2014 Transaction ID : SA11AI.48440</p> <p>Amount of Each Receipt this Period 88.34</p>	
<p>Full Name (Last, First, Middle Initial) B. STEVE GIORGI</p> <p>Mailing Address 8386 Gardenia Street</p> <p>City State Zip Code Virginia MN 55792</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MN CN 65 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 550.04</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 30 / 2014 Transaction ID : SA11AI.48449</p> <p>Amount of Each Receipt this Period 88.34</p>	
<p>Full Name (Last, First, Middle Initial) C. PATRICIA M. GLYNN</p> <p>Mailing Address 55 Aberdeen Avenue</p> <p>City State Zip Code Cambridge MA 02138-0000</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MA CN 93 DIRECTOR OF STRATEGIC PLANNING</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 462.50</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 08 / 2014 Transaction ID : SA11AI.48496</p> <p>Amount of Each Receipt this Period 92.50</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>269.18</p>	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

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

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

FOR LINE NUMBER: PAGE 112 OF 403
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. RICHARD GOLLIN</p> <p>Mailing Address 900 Randolph Place</p> <p>City Union State NJ Zip Code 07083-0000</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME NJ CN 52 Occupation EXECUTIVE DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 479.68</p>			<p>Date of Receipt 05 / 06 / 2014 Transaction ID : SA11AI.47887 Amount of Each Receipt this Period 105.92</p>	
<p>Full Name (Last, First, Middle Initial) B. RICHARD GOLLIN</p> <p>Mailing Address 900 Randolph Place</p> <p>City Union State NJ Zip Code 07083-0000</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME NJ CN 52 Occupation EXECUTIVE DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 493.68</p>			<p>Date of Receipt 05 / 27 / 2014 Transaction ID : SA11AI.48376 Amount of Each Receipt this Period 14.00</p>	
<p>Full Name (Last, First, Middle Initial) C. JAMES R. GOLLINGS Jr.</p> <p>Mailing Address 40 Rathbone</p> <p>City Columbus State OH Zip Code 43214</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 373.86</p>			<p>Date of Receipt 05 / 12 / 2014 Transaction ID : SA11AI.48046 Amount of Each Receipt this Period 41.54</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>161.46</p>	
<p>TOTAL This Period (last page this line number only)..... ▶</p>			<p></p>	

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

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

FOR LINE NUMBER: PAGE 113 OF 403
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. JAMES R. GOLLINGS Jr.</p>			<p>Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>05 / 27 / 2014</div> </div> </p>		
<p>Mailing Address 40 Rathbone</p>			<p>Transaction ID : SA11AI.48098</p>		
<p>City Columbus</p>	<p>State OH</p>	<p>Zip Code 43214</p>	<p>Amount of Each Receipt this Period <div> <div>41.54</div> </div> </p>		
<p>FEC ID number of contributing federal political committee. <div>C</div> </p>					
<p>Name of Employer AFSCME OH LOC 4</p>		<p>Occupation FIELD REPRESENTATIVE</p>			
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p>		<p>Aggregate Year-to-Date ▼ <div> <div>415.40</div> </div> </p>			
<p>Full Name (Last, First, Middle Initial) B. JAMES R. GOLLINGS Jr.</p>			<p>Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>05 / 29 / 2014</div> </div> </p>		
<p>Mailing Address 40 Rathbone</p>			<p>Transaction ID : SA11AI.48150</p>		
<p>City Columbus</p>	<p>State OH</p>	<p>Zip Code 43214</p>	<p>Amount of Each Receipt this Period <div> <div>41.54</div> </div> </p>		
<p>FEC ID number of contributing federal political committee. <div>C</div> </p>					
<p>Name of Employer AFSCME OH LOC 4</p>		<p>Occupation FIELD REPRESENTATIVE</p>			
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p>		<p>Aggregate Year-to-Date ▼ <div> <div>456.94</div> </div> </p>			
<p>Full Name (Last, First, Middle Initial) C. PATRICIA GORDON</p>			<p>Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>05 / 15 / 2014</div> </div> </p>		
<p>Mailing Address 112 Chesbrough Road</p>			<p>Transaction ID : SA11AI.47072</p>		
<p>City West Roxbury</p>	<p>State MA</p>	<p>Zip Code 02132-0000</p>	<p>Amount of Each Receipt this Period <div> <div>26.42</div> </div> </p>		
<p>FEC ID number of contributing federal political committee. <div>C</div> </p>					
<p>Name of Employer AFSCME INT'L</p>		<p>Occupation FIELD OFFICE ASSISTANT II</p>			
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p>		<p>Aggregate Year-to-Date ▼ <div> <div>237.78</div> </div> </p>			
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<div> <div>109.50</div> </div>		
<p>TOTAL This Period (last page this line number only)..... ▶</p>			<div> <div></div> </div>		

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

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

FOR LINE NUMBER:
(check only one)

PAGE 114 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. PATRICIA GORDON</p> <p>Mailing Address 112 Chesbrough Road</p> <p>City State Zip Code West Roxbury MA 02132-0000</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L FIELD OFFICE ASSISTANT II</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 264.20</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47498</p> <p>Amount of Each Receipt this Period 264.20</p>	
<p>Full Name (Last, First, Middle Initial) B. PERRY GORDON</p> <p>Mailing Address P.O. Box 1123</p> <p>City State Zip Code Roy WA 98580</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME WA CN 28 COUNCIL REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 392.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 13 / 2014 Transaction ID : SA11AI.48324</p> <p>Amount of Each Receipt this Period 88.00</p>	
<p>Full Name (Last, First, Middle Initial) C. SHERRYL GORDON</p> <p>Mailing Address 2930 South Broad Street</p> <p>City State Zip Code Trenton NJ 08610</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME NJ CN 1 EXECUTIVE DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 391.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 23 / 2014 Transaction ID : SA11AI.47408</p> <p>Amount of Each Receipt this Period 78.20</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			192.62	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

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

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

FOR LINE NUMBER:
(check only one)

PAGE 115 OF 403

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

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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. DANA M. GOUIN

Mailing Address 9121 Knox Court

City

Laurel

State

MD

Zip Code

20723

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

SUPPORT STAFF

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

270.00

Date of Receipt

05 / 15 / 2014

Transaction ID : SA11AI.47073

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. DANA M. GOUIN

Mailing Address 9121 Knox Court

City

Laurel

State

MD

Zip Code

20723

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

SUPPORT STAFF

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 27 / 2014

Transaction ID : SA11AI.47499

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. JOHN S. GRABEL

Mailing Address 563 Park Lane

City

Madison

State

WI

Zip Code

53711

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

POLITICAL ACTION REPRESENTATIVE II

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

301.56

Date of Receipt

05 / 15 / 2014

Transaction ID : SA11AI.47074

Amount of Each Receipt this Period

43.08

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

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

103.08

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 403
(check only one)

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

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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. JOHN S. GRABEL

Mailing Address 563 Park Lane

City State Zip Code
Madison WI 53711

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

POLITICAL ACTION REPRESENTATIVE II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

344.64

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.47500

Amount of Each Receipt this Period

43.08

Full Name (Last, First, Middle Initial)

B. STEPHEN M. GRAHAM

Mailing Address 7707 Wisconsin Avenue
Apt. 529

City State Zip Code
Bethesda MD 20814

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, ACCOUNTING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

493.30

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.47075

Amount of Each Receipt this Period

55.19

Full Name (Last, First, Middle Initial)

C. STEPHEN M. GRAHAM

Mailing Address 7707 Wisconsin Avenue
Apt. 529

City State Zip Code
Bethesda MD 20814

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, ACCOUNTING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

548.49

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.47501

Amount of Each Receipt this Period

55.19

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

153.46

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:
(check only one)

PAGE 117 OF 403

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

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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. BONNIE L. GRANTZ

Mailing Address 3898 Ascott Court

City

Youngstown

State

OH

Zip Code

44511

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/AUSTINTOWN LSD

Occupation

BUS DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.23

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 12 / 2014

Transaction ID : SA11AI.48954

Amount of Each Receipt this Period

38.47

Full Name (Last, First, Middle Initial)

B. BONNIE L. GRANTZ

Mailing Address 3898 Ascott Court

City

Youngstown

State

OH

Zip Code

44511

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/AUSTINTOWN LSD

Occupation

BUS DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.70

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.48955

Amount of Each Receipt this Period

38.47

Full Name (Last, First, Middle Initial)

C. BONNIE L. GRANTZ

Mailing Address 3898 Ascott Court

City

Youngstown

State

OH

Zip Code

44511

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/AUSTINTOWN LSD

Occupation

BUS DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.17

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 29 / 2014

Transaction ID : SA11AI.48956

Amount of Each Receipt this Period

38.47

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

115.41

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:
 (check only one)

PAGE 118 OF 403

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial) A. R. SEAN GRAYSON		Date of Receipt M M / D D / Y Y Y Y Y 05 / 06 / 2014 Transaction ID : SA11AI.47806	
Mailing Address 10201 Galena Pointe Drive		Amount of Each Receipt this Period 106.84	
City Galena	State OH	Zip Code 43021	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME OH CN 8	Occupation GENERAL COUNSEL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 531.46		
Full Name (Last, First, Middle Initial) B. JONATHAN GREBNER		Date of Receipt M M / D D / Y Y Y Y Y 05 / 06 / 2014 Transaction ID : SA11AI.48595	
Mailing Address 840 Randolph Avenue		Amount of Each Receipt this Period 67.74	
City Saint Paul	State MN	Zip Code 55126	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME MN CN 5/CN14	Occupation POLITICAL DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 338.70		
Full Name (Last, First, Middle Initial) C. STEVE GRETSUK		Date of Receipt M M / D D / Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47077	
Mailing Address 7803 Desiree Street		Amount of Each Receipt this Period 83.83	
City Alexandria	State VA	Zip Code 22315	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation DIRECTOR, INFORMATION SERVICES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 779.47		
SUBTOTAL of Receipts This Page (optional)..... ▶		258.41	
TOTAL This Period (last page this line number only)..... ▶			

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

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for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 119 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. STEVE GRETSUK</p> <p>Mailing Address 7803 Desiree Street</p> <p>City State Zip Code Alexandria VA 22315</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L DIRECTOR, INFORMATION SERVICES</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 863.30</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47503</p> <p>Amount of Each Receipt this Period 83.83</p>
<p>Full Name (Last, First, Middle Initial) B. KIMBERLY GRIFFIN</p> <p>Mailing Address 2456 Five Fathom Circle</p> <p>City State Zip Code Woodbridge VA 22192</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L ADMINISTRATIVE ASSISTANT II</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 353.03</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47078</p> <p>Amount of Each Receipt this Period 38.44</p>
<p>Full Name (Last, First, Middle Initial) C. KIMBERLY GRIFFIN</p> <p>Mailing Address 2456 Five Fathom Circle</p> <p>City State Zip Code Woodbridge VA 22192</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L ADMINISTRATIVE ASSISTANT II</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 391.47</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47504</p> <p>Amount of Each Receipt this Period 38.44</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> <p>TOTAL This Period (last page this line number only)..... ▶</p>		<p>160.71</p>

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 403
(check only one)

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

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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. ALIA GRIFFING

Mailing Address 1315 Smith Street SE

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee.

C

Name of Employer
AFSCME WA CN 28

Occupation
LOBBYIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

05 / 13 / 2014

Transaction ID : SA11AI.48325

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

B. LYLE B GRIMES

Mailing Address 9503 Emery Hill Drive

City Sugarland State TX Zip Code 77498

FEC ID number of contributing federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation
ORGANIZER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.51

Date of Receipt

05 / 15 / 2014

Transaction ID : SA11AI.47079

Amount of Each Receipt this Period

34.93

Full Name (Last, First, Middle Initial)

C. LYLE B GRIMES

Mailing Address 9503 Emery Hill Drive

City Sugarland State TX Zip Code 77498

FEC ID number of contributing federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation
ORGANIZER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.44

Date of Receipt

05 / 27 / 2014

Transaction ID : SA11AI.47505

Amount of Each Receipt this Period

34.93

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

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

111.86

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

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

FOR LINE NUMBER:
(check only one)

PAGE 121 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. DONALD GRINER</p> <p>Mailing Address 1809 Philadelphia Avenue</p> <p>City Northern Cambria State PA Zip Code 15714</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 354.30</p>		<p>Date of Receipt 05 / 12 / 2014 Transaction ID : SA11AI.47290 </p> <p>Amount of Each Receipt this Period 36.86</p>
<p>Full Name (Last, First, Middle Initial) B. OTTO GROENEWALD</p> <p>Mailing Address Route 9 Box 154</p> <p>City Bloomfield State IA Zip Code 52537</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME IA CN 61 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 300.00</p>		<p>Date of Receipt 05 / 08 / 2014 Transaction ID : SA11AI.48867 </p> <p>Amount of Each Receipt this Period 60.00</p>
<p>Full Name (Last, First, Middle Initial) C. DANIEL GROVE</p> <p>Mailing Address 131 Scanlon Dirve</p> <p>City Franklin State PA Zip Code 16323</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 369.50</p>		<p>Date of Receipt 05 / 12 / 2014 Transaction ID : SA11AI.47291 </p> <p>Amount of Each Receipt this Period 73.90</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		170.76
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

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

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

FOR LINE NUMBER:
(check only one)

PAGE 122 OF 403

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

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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. CAROL GUTHRIE

Mailing Address 241 S San Gabriel Loop

City

Liberty Hill

State

TX

Zip Code

78642-5747

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME TX LOC 1624

Occupation

UNION REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 06 / 2014

Transaction ID : SA11AI.47896

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

B. JOSEPH M. GUZYNSKI

Mailing Address 2543 Cornelia Trail
Unit J

City

Woodbury

State

MN

Zip Code

55125

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

544.90

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.47080

Amount of Each Receipt this Period

62.02

Full Name (Last, First, Middle Initial)

C. JOSEPH M. GUZYNSKI

Mailing Address 2543 Cornelia Trail
Unit J

City

Woodbury

State

MN

Zip Code

55125

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

606.92

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.47506

Amount of Each Receipt this Period

62.02

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

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

204.04

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

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

FOR LINE NUMBER:
(check only one)

PAGE 123 OF 403

☒ 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 (Last, First, Middle Initial)

A. DERRYL HALL

Mailing Address 80 Cambridge Drive

City State Zip Code
Springboro OH 45066

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 4

Occupation
FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.65

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 12 / 2014

Transaction ID : SA11AI.48047

Amount of Each Receipt this Period

28.85

Full Name (Last, First, Middle Initial)

B. DERRYL HALL

Mailing Address 80 Cambridge Drive

City State Zip Code
Springboro OH 45066

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 4

Occupation
FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.50

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.48099

Amount of Each Receipt this Period

28.85

Full Name (Last, First, Middle Initial)

C. DERRYL HALL

Mailing Address 80 Cambridge Drive

City State Zip Code
Springboro OH 45066

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 4

Occupation
FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.35

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 29 / 2014

Transaction ID : SA11AI.48152

Amount of Each Receipt this Period

28.85

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

86.55

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 124 OF 403

☒ 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

<p>Full Name (Last, First, Middle Initial) A. KEVIN S. HANES</p> <p>Mailing Address 176 Thunderwood Drive</p> <p>City State Zip Code Pittsburgh PA 15102</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L COMMUNICATIONS SPECIALIST II</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 295.76</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47081</p> <p>Amount of Each Receipt this Period 32.88</p>
<p>Full Name (Last, First, Middle Initial) B. KEVIN S. HANES</p> <p>Mailing Address 176 Thunderwood Drive</p> <p>City State Zip Code Pittsburgh PA 15102</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L COMMUNICATIONS SPECIALIST II</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 328.64</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47507</p> <p>Amount of Each Receipt this Period 32.88</p>
<p>Full Name (Last, First, Middle Initial) C. EUGINE HANKS</p> <p>Mailing Address 296 Churchmans Road</p> <p>City State Zip Code New Castle DE 19720-9930</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME DE CN 81 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 239.01</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 08 / 2014 Transaction ID : SA11AI.48015</p> <p>Amount of Each Receipt this Period 57.98</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		<p>123.74</p>
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

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

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

FOR LINE NUMBER:
(check only one)

PAGE 125 OF 403

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

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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. EUGENE HANKS

Mailing Address 296 Churchmans Road

City State Zip Code
 New Castle DE 19720-9930

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME DE CN 81

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.99

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 08 / 2014

Transaction ID : SA11AI.48022

Amount of Each Receipt this Period

57.98

Full Name (Last, First, Middle Initial)

B. RYAN HANSON

Mailing Address 300 Hardman Avenue South

City State Zip Code
 South St. Paul MN 55075

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MN CN 5/CN14

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.84

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 06 / 2014

Transaction ID : SA11AI.48597

Amount of Each Receipt this Period

56.08

Full Name (Last, First, Middle Initial)

C. GABRIEL HARGROVE

Mailing Address 4912 Woodlawn Avenue N

City State Zip Code
 Seattle WA 98013

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME WA CN 28

Occupation

COUNCIL 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
 05 / 13 / 2014

Transaction ID : SA11AI.48326

Amount of Each Receipt this Period

50.00

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

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

164.06

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

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

FOR LINE NUMBER: PAGE 126 OF 403
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 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. MARK E. HARRINGTON Full Name (Last, First, Middle Initial) Mailing Address 3855 Poplar Bend Drive City Columbus State OH Zip Code 43204 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 256.23			Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.48048 Amount of Each Receipt this Period 28.47
B. MARK E. HARRINGTON Full Name (Last, First, Middle Initial) Mailing Address 3855 Poplar Bend Drive City Columbus State OH Zip Code 43204 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 284.70			Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.48100 Amount of Each Receipt this Period 28.47
C. MARK E. HARRINGTON Full Name (Last, First, Middle Initial) Mailing Address 3855 Poplar Bend Drive City Columbus State OH Zip Code 43204 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 313.17			Date of Receipt M M / D D / Y Y Y Y Y 05 / 29 / 2014 Transaction ID : SA11AI.48153 Amount of Each Receipt this Period 28.47
SUBTOTAL of Receipts This Page (optional)..... ▶			85.41
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:
(check only one)

PAGE 127 OF 403

☒ 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

<p>Full Name (Last, First, Middle Initial) A. SHARON L. HARRIS</p> <p>Mailing Address 677 E. 4th Avenue</p> <p>City State Zip Code Columbus OH 43201</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4/COLUMBUS CITY BUS DRIVER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 225.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 01 / 2014 Transaction ID : SA11AI.47381</p> <p>Amount of Each Receipt this Period 25.00</p>		
<p>Full Name (Last, First, Middle Initial) B. SHARON L. HARRIS</p> <p>Mailing Address 677 E. 4th Avenue</p> <p>City State Zip Code Columbus OH 43201</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4/COLUMBUS CITY BUS DRIVER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 250.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.47385</p> <p>Amount of Each Receipt this Period 25.00</p>		
<p>Full Name (Last, First, Middle Initial) C. SHARON L. HARRIS</p> <p>Mailing Address 677 E. 4th Avenue</p> <p>City State Zip Code Columbus OH 43201</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4/COLUMBUS CITY BUS DRIVER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 275.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47432</p> <p>Amount of Each Receipt this Period 25.00</p>		
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>75.00</p>		
<p>TOTAL This Period (last page this line number only)..... ▶</p>					

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

 FOR LINE NUMBER: PAGE 128 OF 403
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial) A. KATHERINE AC HARRISON			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td> <td>1</td><td>5</td><td></td> <td>2</td><td>0</td><td>1</td><td>4</td> </tr> </table> Transaction ID : SA11AI.47084			M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	5		2	0	1	4
M	M	/	D	D	/	Y	Y	Y	Y																
0	5		1	5		2	0	1	4																
Mailing Address 2634 S Kenmore Court			Amount of Each Receipt this Period <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>47.71</td> </tr> </table>																						47.71
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C																									
Name of Employer AFSCME INT'L		Occupation AFFILIATE COMMUNICATION MANAGER																							
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>429.39</td> </tr> </table>																							429.39
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Full Name (Last, First, Middle Initial) B. KATHERINE AC HARRISON			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td> <td>2</td><td>7</td><td></td> <td>2</td><td>0</td><td>1</td><td>4</td> </tr> </table> Transaction ID : SA11AI.47510			M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	7		2	0	1	4
M	M	/	D	D	/	Y	Y	Y	Y																
0	5		2	7		2	0	1	4																
Mailing Address 2634 S Kenmore Court			Amount of Each Receipt this Period <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>47.71</td> </tr> </table>																						47.71
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Name of Employer AFSCME INT'L		Occupation AFFILIATE COMMUNICATION MANAGER																							
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Full Name (Last, First, Middle Initial) C. STEPHANIE R. HARRISON			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td> <td>1</td><td>5</td><td></td> <td>2</td><td>0</td><td>1</td><td>4</td> </tr> </table> Transaction ID : SA11AI.47085			M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	5		2	0	1	4
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0	5		1	5		2	0	1	4																
Mailing Address 1640 Upshur Street NW			Amount of Each Receipt this Period <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>64.04</td> </tr> </table>																						64.04
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Name of Employer AFSCME INT'L		Occupation DIRECTOR, HUMAN RESOURCES																							
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>576.36</td> </tr> </table>																							576.36
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SUBTOTAL of Receipts This Page (optional)..... ▶			<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>159.46</td> </tr> </table>												159.46										
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TOTAL This Period (last page this line number only)..... ▶			<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><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:
 (check only one)

PAGE 129 OF 403

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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. STEPHANIE R. HARRISON			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47511		
Mailing Address 1640 Upshur Street NW			Amount of Each Receipt this Period 640.40		
City Washington	State DC	Zip Code 20011			
FEC ID number of contributing federal political committee. C					
Name of Employer AFSCME INT'L		Occupation DIRECTOR, HUMAN RESOURCES			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 640.40			
Full Name (Last, First, Middle Initial) B. MICHAEL HARTEL			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 28 / 2014 Transaction ID : SA11AI.47868		
Mailing Address 4531 6th Street			Amount of Each Receipt this Period 50.00		
City Minneapolis	State MN	Zip Code 55421-2234			
FEC ID number of contributing federal political committee. C					
Name of Employer AFSCME MN CN 5/STATE OF MN		Occupation STAFF REPRESENTATIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00			
Full Name (Last, First, Middle Initial) C. JAMES A. HARTLE			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 16 / 2014 Transaction ID : SA11AI.48546		
Mailing Address 3172 Schell Drive			Amount of Each Receipt this Period 22.00		
City Marion	State OH	Zip Code 43302			
FEC ID number of contributing federal political committee. C					
Name of Employer AFSCME OH LOC 11/STATE OF OH		Occupation CORRECTION OFFICER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00			
SUBTOTAL of Receipts This Page (optional)..... ▶			136.04		
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 PageFOR LINE NUMBER:
(check only one)

PAGE 130 OF 403

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. JAMES A. HARTLE

Mailing Address 3172 Schell Drive

City

Marion

State

OH

Zip Code

43302

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

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
0	5		3	0		2	0	1	4

Transaction ID : SA11AI.48566

Amount of Each Receipt this Period

22.00

Full Name (Last, First, Middle Initial)

B. RAYDENE HARWICKMailing Address 2101-27 Hill Road
Apt. #1

City

Sellersville

State

PA

Zip Code

18960

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

342.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	1	4

Transaction ID : SA11AI.47292

Amount of Each Receipt this Period

68.40

Full Name (Last, First, Middle Initial)

C. DAVID HASLETT

Mailing Address 4031 Executive Park Drive

City

Harrisburg

State

PA

Zip Code

17111

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

269.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	1	4

Transaction ID : SA11AI.47293

Amount of Each Receipt this Period

53.90

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

144.30

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 131 OF 403

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. MICHAEL D. HATCHER</p>			<p>Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>05 / 15 / 2014</div> </div> Transaction ID : SA11AI.47086 </p>		
<p>Mailing Address 1981 Hogback Road</p>					
<p>City Albany</p>	<p>State KY</p>	<p>Zip Code 42602</p>			
<p>FEC ID number of contributing federal political committee. <div>C</div> </p>			<p>Amount of Each Receipt this Period <div>48.21</div> </p>		
<p>Name of Employer AFSCME INT'L</p>		<p>Occupation ASSISTANT TO REGIONAL DIRECTOR</p>			
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p>		<p>Aggregate Year-to-Date ▼ <div>433.89</div> </p>			
<p>Full Name (Last, First, Middle Initial) B. MICHAEL D. HATCHER</p>			<p>Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>05 / 27 / 2014</div> </div> Transaction ID : SA11AI.47512 </p>		
<p>Mailing Address 1981 Hogback Road</p>					
<p>City Albany</p>	<p>State KY</p>	<p>Zip Code 42602</p>			
<p>FEC ID number of contributing federal political committee. <div>C</div> </p>			<p>Amount of Each Receipt this Period <div>48.21</div> </p>		
<p>Name of Employer AFSCME INT'L</p>		<p>Occupation ASSISTANT TO REGIONAL DIRECTOR</p>			
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p>		<p>Aggregate Year-to-Date ▼ <div>482.10</div> </p>			
<p>Full Name (Last, First, Middle Initial) C. KAREN HATHAWAY</p>			<p>Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>05 / 08 / 2014</div> </div> Transaction ID : SA11AI.48497 </p>		
<p>Mailing Address 29 Jenny Lind Street</p>					
<p>City Taunton</p>	<p>State MA</p>	<p>Zip Code 02780-0000</p>			
<p>FEC ID number of contributing federal political committee. <div>C</div> </p>			<p>Amount of Each Receipt this Period <div>40.46</div> </p>		
<p>Name of Employer AFSCME MA CN 93</p>		<p>Occupation STAFF REPRESENTATIVE</p>			
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p>		<p>Aggregate Year-to-Date ▼ <div>202.30</div> </p>			
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<div>136.88</div>		
<p>TOTAL This Period (last page this line number only)..... ▶</p>			<div></div>		

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

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

FOR LINE NUMBER:
(check only one)

PAGE 132 OF 403

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

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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. ERIC HAUGEE

Mailing Address 1009 Edmund Avenue

City State Zip Code
Saint Paul MN 55104

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MN CN 5/CN14

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.84

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 06 / 2014

Transaction ID : SA11AI.48598

Amount of Each Receipt this Period

56.08

Full Name (Last, First, Middle Initial)

B. SUZANNE D. HAVILAND

Mailing Address 155 Standish Road

City State Zip Code
Coventry CT 06238-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

INTERNATIONAL UNION REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

477.54

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.47087

Amount of Each Receipt this Period

45.48

Full Name (Last, First, Middle Initial)

C. SUZANNE D. HAVILAND

Mailing Address 155 Standish Road

City State Zip Code
Coventry CT 06238-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

INTERNATIONAL UNION REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

523.02

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.47513

Amount of Each Receipt this Period

45.48

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

147.04

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 133 OF 403

(check only one)

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

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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. LISA HAZARD

Mailing Address 4031 Executive Park Drive

City State Zip Code
Harrisburg PA 17111

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.40

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 12 / 2014

Transaction ID : SA11AI.47294

Amount of Each Receipt this Period

69.28

Full Name (Last, First, Middle Initial)

B. JIMMIE HEARNS

Mailing Address 18509 Mendota

City State Zip Code
Detroit MI 48221

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.68

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 08 / 2014

Transaction ID : SA11AI.48202

Amount of Each Receipt this Period

36.21

Full Name (Last, First, Middle Initial)

C. JIMMIE HEARNS

Mailing Address 18509 Mendota

City State Zip Code
Detroit MI 48221

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.89

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 21 / 2014

Transaction ID : SA11AI.48225

Amount of Each Receipt this Period

36.21

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

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

141.70

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

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

FOR LINE NUMBER:
(check only one)

PAGE 134 OF 403

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

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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. NANCY HEMMERLY

Mailing Address 46 Alfred Drive

City

Lewisberry

State

PA

Zip Code

17339

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

369.50

Date of Receipt

05 / 12 / 2014

Transaction ID : SA11AI.47295

Amount of Each Receipt this Period

73.90

Full Name (Last, First, Middle Initial)

B. DAVID J. HENDERSON

Mailing Address 2040 Spring Valley Road

City

Pittsburgh

State

PA

Zip Code

15243-1422

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

587.10

Date of Receipt

05 / 12 / 2014

Transaction ID : SA11AI.47296

Amount of Each Receipt this Period

117.42

Full Name (Last, First, Middle Initial)

C. KAY HENDERSON

Mailing Address 624 S. Winnifred Street

City

Tacoma

State

WA

Zip Code

98465

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

315.00

Date of Receipt

05 / 09 / 2014

Transaction ID : SA11AI.48284

Amount of Each Receipt this Period

35.00

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

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

226.32

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

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

FOR LINE NUMBER:
(check only one)

PAGE 135 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. KAY HENDERSON</p> <p>Mailing Address 624 S. Winnifred Street</p> <p>City State Zip Code Tacoma WA 98465</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 350.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 23 / 2014</p> <p>Transaction ID : SA11AI.48327</p> <p>Amount of Each Receipt this Period 35.00</p>
<p>Full Name (Last, First, Middle Initial) B. TIMOTHY HENDERSON</p> <p>Mailing Address 6987 W. Shadow Lake Drive</p> <p>City State Zip Code Lino Lakes MN 55014-1931</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MN CN 5 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 252.76</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 06 / 2014</p> <p>Transaction ID : SA11AI.48599</p> <p>Amount of Each Receipt this Period 53.28</p>
<p>Full Name (Last, First, Middle Initial) C. MONIQUE L. HENNAGAN</p> <p>Mailing Address 505 Winter View Way</p> <p>City State Zip Code Stockbridge GA 30281</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L ORGANIZER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 343.29</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 15 / 2014</p> <p>Transaction ID : SA11AI.47088</p> <p>Amount of Each Receipt this Period 45.77</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		<p>134.05</p>
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

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. 02/2003

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 403
(check only one)

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

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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. ERIC D. HERTZOG

Mailing Address 141 174th Street E.

City State Zip Code
Spanaway WA 98387

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME WA CN 28/STATE OF WA

Occupation
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2014

Transaction ID : SA11AI.48329

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. JOHANNA P. HESTER

Mailing Address 805 Glen Drive

City State Zip Code
San Leandro CA 94577

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME CA LOC 3930

Occupation
SPECIAL ASSISTANT TO EXEC. DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.48378

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. DENNIS HILL

Mailing Address 4 Hickory Street

City State Zip Code
Farmington MN 55024-9124

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MN CN 5/STATE OF MN

Occupation
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 28 / 2014

Transaction ID : SA11AI.47869

Amount of Each Receipt this Period

100.00

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

FOR LINE NUMBER:
(check only one)

PAGE 138 OF 403

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

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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. DONALD J. HILL

Mailing Address 2382 Krumroy Road

City State Zip Code
Akron OH 44312

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/SPRINGFIELD SD

Occupation

CUSTODIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.48958

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. DONALD J. HILL

Mailing Address 2382 Krumroy Road

City State Zip Code
Akron OH 44312

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/SPRINGFIELD SD

Occupation

CUSTODIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 29 / 2014

Transaction ID : SA11AI.48959

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. KEVIN E. HILL

Mailing Address 541 Coconut Street

City State Zip Code
Satellite Beach FL 32937

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

FIELD COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.47091

Amount of Each Receipt this Period

54.00

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

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

104.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 139 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. KEVIN E. HILL</p> <p>Mailing Address 541 Coconut Street</p> <p>City State Zip Code Satellite Beach FL 32937</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L FIELD COORDINATOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 540.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47517</p> <p>Amount of Each Receipt this Period 54.00</p>		
<p>Full Name (Last, First, Middle Initial) B. TRACY A. HILL</p> <p>Mailing Address 2382 Krumroy Road</p> <p>City State Zip Code Akron OH 44312</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4/SPRINGFIELD SD TEACHER AIDE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 225.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.48961</p> <p>Amount of Each Receipt this Period 25.00</p>		
<p>Full Name (Last, First, Middle Initial) C. TRACY A. HILL</p> <p>Mailing Address 2382 Krumroy Road</p> <p>City State Zip Code Akron OH 44312</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4/SPRINGFIELD SD TEACHER AIDE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 250.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 29 / 2014 Transaction ID : SA11AI.48962</p> <p>Amount of Each Receipt this Period 25.00</p>		
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>104.00</p>		
<p>TOTAL This Period (last page this line number only)..... ▶</p>					

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

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

FOR LINE NUMBER:
(check only one)

PAGE 140 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. ELIZABETH C. HO</p> <p>Mailing Address 1511 Kalaniewai Street</p> <p>City Honolulu State HI Zip Code 96821</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation AREA FIELD SERVICES DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 425.97</p>			<p>Date of Receipt 05 / 15 / 2014 Transaction ID : SA11AI.47092 </p> <p>Amount of Each Receipt this Period 47.33</p>	
<p>Full Name (Last, First, Middle Initial) B. ELIZABETH C. HO</p> <p>Mailing Address 1511 Kalaniewai Street</p> <p>City Honolulu State HI Zip Code 96821</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation AREA FIELD SERVICES DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 473.30</p>			<p>Date of Receipt 05 / 27 / 2014 Transaction ID : SA11AI.47518 </p> <p>Amount of Each Receipt this Period 47.33</p>	
<p>Full Name (Last, First, Middle Initial) C. KARLA HODGE</p> <p>Mailing Address 1212 N. 14th Street</p> <p>City Harrisburg State PA Zip Code 17103</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 369.50</p>			<p>Date of Receipt 05 / 12 / 2014 Transaction ID : SA11AI.47298 </p> <p>Amount of Each Receipt this Period 73.90</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			168.56	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

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

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for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 141 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. DONNA L. HOFLAND</p> <p>Mailing Address 4032 Division Avenue W</p> <p>City State Zip Code Bremerton WA 98312</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME WA CN 28/STATE OF WA SUPPLY OFFICE I</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 230.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 09 / 2014 Transaction ID : SA11AI.48287</p> <p>Amount of Each Receipt this Period 30.00</p>
<p>Full Name (Last, First, Middle Initial) B. DONNA L. HOFLAND</p> <p>Mailing Address 4032 Division Avenue W</p> <p>City State Zip Code Bremerton WA 98312</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME WA CN 28/STATE OF WA SUPPLY OFFICE I</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 260.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 23 / 2014 Transaction ID : SA11AI.48330</p> <p>Amount of Each Receipt this Period 30.00</p>
<p>Full Name (Last, First, Middle Initial) C. JENNIFER E. HOHMAN</p> <p>Mailing Address 1710 Shadyside Drive</p> <p>City State Zip Code Edgewater MD 21037</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L ASSISTANT DIRECTOR, BENEFITS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 368.91</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47094</p> <p>Amount of Each Receipt this Period 40.99</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		100.99
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

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

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

FOR LINE NUMBER:
(check only one)

PAGE 142 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. JENNIFER E. HOHMAN</p> <p>Mailing Address 1710 Shadyside Drive</p> <p>City State Zip Code Edgewater MD 21037</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L ASSISTANT DIRECTOR, BENEFITS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 409.90</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014</p> <p>Transaction ID : SA11AI.47520</p> <p>Amount of Each Receipt this Period 40.99</p>
<p>Full Name (Last, First, Middle Initial) B. KAREN S HOLDRIDGE</p> <p>Mailing Address 3511 Huntingbrook Drive #207</p> <p>City State Zip Code Columbus OH 43213</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4/COLUMBUS CITY BUS DRIVER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 225.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 01 / 2014</p> <p>Transaction ID : SA11AI.47382</p> <p>Amount of Each Receipt this Period 25.00</p>
<p>Full Name (Last, First, Middle Initial) C. KAREN S HOLDRIDGE</p> <p>Mailing Address 3511 Huntingbrook Drive #207</p> <p>City State Zip Code Columbus OH 43213</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4/COLUMBUS CITY BUS DRIVER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 250.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014</p> <p>Transaction ID : SA11AI.47386</p> <p>Amount of Each Receipt this Period 25.00</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		<p>90.99</p>
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

 FOR LINE NUMBER:
 (check only one)

PAGE 143 OF 403

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. KAREN S HOLDRIDGE

 Mailing Address 3511 Huntingbrook Drive
 #207

City	State	Zip Code
Columbus	OH	43213

 FEC ID number of contributing
 federal political committee.

Name of Employer

AFSCME OH LOC 4/COLUMBUS CITY

Occupation

BUS DRIVER

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
05	/	27	/	2014

Transaction ID : SA11AI.47433

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

B. CHRISTINE D. HOLLAND

Mailing Address 29332 Kearsley Road

City	State	Zip Code
Millbury	OH	43447

 FEC ID number of contributing
 federal political committee.

Name of Employer

AFSCME OH LOC 4/OREGON BOE

Occupation

SECRETARY

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
05	/	12	/	2014

Transaction ID : SA11AI.48963

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. CHRISTINE D. HOLLAND

Mailing Address 29332 Kearsley Road

City	State	Zip Code
Millbury	OH	43447

 FEC ID number of contributing
 federal political committee.

Name of Employer

AFSCME OH LOC 4/OREGON BOE

Occupation

SECRETARY

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
05	/	12	/	2014

Transaction ID : SA11AI.48964

Amount of Each Receipt this Period

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:
(check only one)

PAGE 144 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. CHRISTINE D. HOLLAND</p> <p>Mailing Address 29332 Kearsley Road</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Millbury</td> <td style="width: 33%;">State OH</td> <td style="width: 33%;">Zip Code 43447</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME OH LOC 4/OREGON BOE</td> <td style="width: 33%;">Occupation SECRETARY</td> <td style="width: 33%;"></td> </tr> </table> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 298.35 </p>			City Millbury	State OH	Zip Code 43447	Name of Employer AFSCME OH LOC 4/OREGON BOE	Occupation SECRETARY		<p>Date of Receipt 05 / 20 / 2014 Transaction ID : SA11AI.48965 </p> <p>Amount of Each Receipt this Period 50.00 </p>		
City Millbury	State OH	Zip Code 43447									
Name of Employer AFSCME OH LOC 4/OREGON BOE	Occupation SECRETARY										
<p>Full Name (Last, First, Middle Initial) B. DANNY J. HOMAN</p> <p>Mailing Address 4320 NW Second Avenue</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Des Moines</td> <td style="width: 33%;">State IA</td> <td style="width: 33%;">Zip Code 50313</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME IA CN 61</td> <td style="width: 33%;">Occupation PRESIDENT</td> <td style="width: 33%;"></td> </tr> </table> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 680.00 </p>			City Des Moines	State IA	Zip Code 50313	Name of Employer AFSCME IA CN 61	Occupation PRESIDENT		<p>Date of Receipt 05 / 08 / 2014 Transaction ID : SA11AI.48871 </p> <p>Amount of Each Receipt this Period 80.00 </p>		
City Des Moines	State IA	Zip Code 50313									
Name of Employer AFSCME IA CN 61	Occupation PRESIDENT										
<p>Full Name (Last, First, Middle Initial) C. DANNY J. HOMAN</p> <p>Mailing Address 4320 NW Second Avenue</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Des Moines</td> <td style="width: 33%;">State IA</td> <td style="width: 33%;">Zip Code 50313</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME IA CN 61</td> <td style="width: 33%;">Occupation PRESIDENT</td> <td style="width: 33%;"></td> </tr> </table> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 750.00 </p>			City Des Moines	State IA	Zip Code 50313	Name of Employer AFSCME IA CN 61	Occupation PRESIDENT		<p>Date of Receipt 05 / 27 / 2014 Transaction ID : SA11AI.48380 </p> <p>Amount of Each Receipt this Period 70.00 </p>		
City Des Moines	State IA	Zip Code 50313									
Name of Employer AFSCME IA CN 61	Occupation PRESIDENT										
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			200.00								
<p>TOTAL This Period (last page this line number only)..... ▶</p>											

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 145 OF 403
(check only one)

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

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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. JOHN D. HORN

Mailing Address 8615 Maineville Road

City State Zip Code
Maineville OH 45039

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 4

Occupation
FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 12 / 2014

Transaction ID : SA11AI.48049

Amount of Each Receipt this Period

33.00

Full Name (Last, First, Middle Initial)

B. JOHN D. HORN

Mailing Address 8615 Maineville Road

City State Zip Code
Maineville OH 45039

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 4

Occupation
FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 12 / 2014

Transaction ID : SA11AI.49051

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. JOHN D. HORN

Mailing Address 8615 Maineville Road

City State Zip Code
Maineville OH 45039

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 4

Occupation
FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.48101

Amount of Each Receipt this Period

33.00

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

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

106.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 146 OF 403

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

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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. JOHN D. HORN

Mailing Address 8615 Maineville Road

City
Maineville

State Zip Code
OH 45039

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.00

Date of Receipt

05 / 29 / 2014

Transaction ID : SA11AI.48154

Amount of Each Receipt this Period

33.00

Full Name (Last, First, Middle Initial)

B. TIMOTHY M. HOSHAL

Mailing Address P.O. Box 239

City
Coleraine

State Zip Code
MN 55722

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MN CN 65

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

381.30

Date of Receipt

05 / 01 / 2014

Transaction ID : SA11AI.48441

Amount of Each Receipt this Period

72.26

Full Name (Last, First, Middle Initial)

C. TIMOTHY M. HOSHAL

Mailing Address P.O. Box 239

City
Coleraine

State Zip Code
MN 55722

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MN CN 65

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

453.56

Date of Receipt

05 / 30 / 2014

Transaction ID : SA11AI.48450

Amount of Each Receipt this Period

72.26

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

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

177.52

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
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 Detailed Summary Page

 FOR LINE NUMBER:
 (check only one)

PAGE 147 OF 403

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. CHRISTINE R. HOSKINS

Mailing Address 8306 James Street

City

Upper Marlboro

State

MD

Zip Code

20772

FEC ID number of contributing federal political committee.

Name of Employer

AFSCME INT'L

Occupation

AFFILIATE RELATIONS COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	1	4

Transaction ID : SA11AI.47096

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

B. CHRISTINE R. HOSKINS

Mailing Address 8306 James Street

City

Upper Marlboro

State

MD

Zip Code

20772

FEC ID number of contributing federal political committee.

Name of Employer

AFSCME INT'L

Occupation

AFFILIATE RELATIONS COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	7		2	0	1	4

Transaction ID : SA11AI.47522

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. DENNIS HOULIHAN

Mailing Address 1744 Church Street NW

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing federal political committee.

Name of Employer

AFSCME INT'L

Occupation

LABOR ECONOMIST III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	1	4

Transaction ID : SA11AI.47097

Amount of Each Receipt this Period

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 148 OF 403
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. DENNIS HOULIHAN</p> <p>Mailing Address 1744 Church Street NW</p> <p>City Washington State DC Zip Code 20036</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation LABOR ECONOMIST III</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 492.20</p>			<p>Date of Receipt 05 / 27 / 2014 Transaction ID : SA11AI.47523 </p> <p>Amount of Each Receipt this Period 49.22 </p>	
<p>Full Name (Last, First, Middle Initial) B. BRITTNEY HOWARD</p> <p>Mailing Address 6800 N High Street</p> <p>City Worthington State OH Zip Code 43085</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH CN 8 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 263.24</p>			<p>Date of Receipt 05 / 06 / 2014 Transaction ID : SA11AI.47807 </p> <p>Amount of Each Receipt this Period 53.20 </p>	
<p>Full Name (Last, First, Middle Initial) C. JAMES E. HOWELL</p> <p>Mailing Address 620 Scrubgrass Road</p> <p>City Pittsburgh State PA Zip Code 15243</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation REGIONAL DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 535.92</p>			<p>Date of Receipt 05 / 15 / 2014 Transaction ID : SA11AI.47098 </p> <p>Amount of Each Receipt this Period 66.99 </p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			169.41	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

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

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 149 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. JAMES E. HOWELL</p> <p>Mailing Address 620 Scrubgrass Road</p> <p>City State Zip Code Pittsburgh PA 15243</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L REGIONAL DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 602.91</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47524</p> <p>Amount of Each Receipt this Period 66.99</p>
<p>Full Name (Last, First, Middle Initial) B. SAMUEL M. HUGGINS</p> <p>Mailing Address 235 Scenic Hill Drive</p> <p>City State Zip Code Carnegie PA 15106</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L REGIONAL FIELD ADMINISTRATOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 315.36</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47100</p> <p>Amount of Each Receipt this Period 35.04</p>
<p>Full Name (Last, First, Middle Initial) C. SAMUEL M. HUGGINS</p> <p>Mailing Address 235 Scenic Hill Drive</p> <p>City State Zip Code Carnegie PA 15106</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L REGIONAL FIELD ADMINISTRATOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 350.40</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47526</p> <p>Amount of Each Receipt this Period 35.04</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		137.07
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

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

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

FOR LINE NUMBER:
(check only one)

PAGE 150 OF 403

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

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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. CHUNG N. HUI

Mailing Address 12235 Cypress Spring Road

City State Zip Code
Clarksburg MD 20871

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

FINANCE COORDINATOR, POLITICAL ACTIC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.51

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.47101

Amount of Each Receipt this Period

45.39

Full Name (Last, First, Middle Initial)

B. CHUNG N. HUI

Mailing Address 12235 Cypress Spring Road

City State Zip Code
Clarksburg MD 20871

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

FINANCE COORDINATOR, POLITICAL ACTIC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

453.90

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.47527

Amount of Each Receipt this Period

45.39

Full Name (Last, First, Middle Initial)

C. WILLIAM S. HURLOW

Mailing Address 4805 Monnett Chapel Road

City State Zip Code
Galion OH 44833

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/GALION BOE

Occupation

CUSTODIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.72

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 12 / 2014

Transaction ID : SA11AI.48966

Amount of Each Receipt this Period

20.84

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

111.62

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:
(check only one)

PAGE 151 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. WILLIAM S. HURLOW</p> <p>Mailing Address 4805 Monnett Chapel Road</p> <p>City State Zip Code Galion OH 44833</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4/GALION BOE CUSTODIAN</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 267.56</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.48967</p> <p>Amount of Each Receipt this Period 20.84</p>		
<p>Full Name (Last, First, Middle Initial) B. WILLIAM S. HURLOW</p> <p>Mailing Address 4805 Monnett Chapel Road</p> <p>City State Zip Code Galion OH 44833</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4/GALION BOE CUSTODIAN</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 288.40</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.48968</p> <p>Amount of Each Receipt this Period 20.84</p>		
<p>Full Name (Last, First, Middle Initial) C. CARLA INSINGA-MINSER</p> <p>Mailing Address 4287 South Carolina Drive</p> <p>City State Zip Code Blue Ridge PA 17112</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME PA CN 13 ORGANIZING DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 498.30</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.47299</p> <p>Amount of Each Receipt this Period 99.66</p>		
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>141.34</p>		
<p>TOTAL This Period (last page this line number only)..... ▶</p>			<p></p>		

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

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

FOR LINE NUMBER:
(check only one)

PAGE 152 OF 403

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

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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. WILLIAM ISLER

Mailing Address 5003 Frederick Bequest Court

City State Zip Code
 Bowie MD 20720

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

MANAGER, GENERAL SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.50

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 15 / 2014

Transaction ID : SA11AI.47102

Amount of Each Receipt this Period

43.50

Full Name (Last, First, Middle Initial)

B. WILLIAM ISLER

Mailing Address 5003 Frederick Bequest Court

City State Zip Code
 Bowie MD 20720

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

MANAGER, GENERAL SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.00

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 27 / 2014

Transaction ID : SA11AI.47528

Amount of Each Receipt this Period

43.50

Full Name (Last, First, Middle Initial)

C. ALBERT JACKSON

Mailing Address 3690 Orange Place
 Suite 550

City State Zip Code
 Beachwood OH 44122

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.58

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 12 / 2014

Transaction ID : SA11AI.48050

Amount of Each Receipt this Period

34.62

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

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

121.62

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

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

FOR LINE NUMBER: PAGE 153 OF 403
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. ALBERT JACKSON</p> <p>Mailing Address 3690 Orange Place Suite 550</p> <p>City Beachwood State OH Zip Code 44122</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 346.20</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.48102</p> <p>Amount of Each Receipt this Period 34.62</p>
<p>Full Name (Last, First, Middle Initial) B. ALBERT JACKSON</p> <p>Mailing Address 3690 Orange Place Suite 550</p> <p>City Beachwood State OH Zip Code 44122</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 380.82</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 29 / 2014 Transaction ID : SA11AI.48155</p> <p>Amount of Each Receipt this Period 34.62</p>
<p>Full Name (Last, First, Middle Initial) C. JUSTUS JAMES</p> <p>Mailing Address 1705 Platt Court</p> <p>City Allentown State PA Zip Code 18104</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 369.50</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.47301</p> <p>Amount of Each Receipt this Period 73.90</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		143.14
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

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

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for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 154 OF 403

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

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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. EDWIN S. JAYNE

Mailing Address 3304 Alabama Avenue

City

Alexandria

State

VA

Zip Code

22305

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, FED GOV'T AFFAIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

524.25

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.47103

Amount of Each Receipt this Period

58.25

Full Name (Last, First, Middle Initial)

B. EDWIN S. JAYNE

Mailing Address 3304 Alabama Avenue

City

Alexandria

State

VA

Zip Code

22305

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, FED GOV'T AFFAIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

582.50

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.47529

Amount of Each Receipt this Period

58.25

Full Name (Last, First, Middle Initial)

C. PAMELA L. JENKINS

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

AFSCME INT'L

Occupation

SPECIAL ASSISTANT TO THE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

531.63

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.47105

Amount of Each Receipt this Period

59.07

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

175.57

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

FOR LINE NUMBER: PAGE 155 OF 403

(check only one)

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

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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. PAMELA L. JENKINS

Mailing Address 47604 Sandbank Square

 City State Zip Code
 Potomac Falls VA 20165

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

SPECIAL ASSISTANT TO THE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

590.70

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 05 / 27 / 2014

Transaction ID : SA11AI.47531

Amount of Each Receipt this Period

59.07

Full Name (Last, First, Middle Initial)

B. BRIAN JENNINGS

Mailing Address 1104 26th Street

 City State Zip Code
 Des Moines IA 50311

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME IA CN 61

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 05 / 08 / 2014

Transaction ID : SA11AI.48872

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. FRANK X. JEREZ

Mailing Address 94 Karatzas Avenue

 City State Zip Code
 Manchester NH 03014-0000

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

FIELD COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

402.21

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 05 / 15 / 2014

Transaction ID : SA11AI.47106

Amount of Each Receipt this Period

44.69

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

153.76

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:
(check only one)

PAGE 156 OF 403

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

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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. FRANK X. JEREZ

Mailing Address 94 Karatzas Avenue

City

Manchester

State

NH

Zip Code

03014-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

FIELD COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

446.90

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.47532

Amount of Each Receipt this Period

44.69

Full Name (Last, First, Middle Initial)

B. CHAD G. JOHNSON

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

AFSCME INT'L

Occupation

AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.35

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.47108

Amount of Each Receipt this Period

35.15

Full Name (Last, First, Middle Initial)

C. CHAD G. JOHNSON

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

AFSCME INT'L

Occupation

AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.50

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.47534

Amount of Each Receipt this Period

35.15

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

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

114.99

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

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

FOR LINE NUMBER:
(check only one)

PAGE 157 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. JULIA E. JOHNSON</p> <p>Mailing Address 2066 Shady Grove Way</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Louisville</td> <td style="width: 33%;">State KY</td> <td style="width: 33%;">Zip Code 40218</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME KY CN 962</td> <td style="width: 66%;">Occupation STAFF REPRESENTATIVE</td> </tr> </table> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 500.00 </p>			City Louisville	State KY	Zip Code 40218	Name of Employer AFSCME KY CN 962	Occupation STAFF REPRESENTATIVE	<p>Date of Receipt 05 / 20 / 2014 Transaction ID : SA11AI.48475 </p> <p>Amount of Each Receipt this Period 100.00 </p>		
City Louisville	State KY	Zip Code 40218								
Name of Employer AFSCME KY CN 962	Occupation STAFF REPRESENTATIVE									
<p>Full Name (Last, First, Middle Initial) B. SETH M. JOHNSON</p> <p>Mailing Address 727 7th Street NE</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Washington</td> <td style="width: 33%;">State DC</td> <td style="width: 33%;">Zip Code 20002</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME INT'L</td> <td style="width: 66%;">Occupation ASSISTANT DIRECTOR, POLITICAL ACTION</td> </tr> </table> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 966.87 </p>			City Washington	State DC	Zip Code 20002	Name of Employer AFSCME INT'L	Occupation ASSISTANT DIRECTOR, POLITICAL ACTION	<p>Date of Receipt 05 / 15 / 2014 Transaction ID : SA11AI.47109 </p> <p>Amount of Each Receipt this Period 107.43 </p>		
City Washington	State DC	Zip Code 20002								
Name of Employer AFSCME INT'L	Occupation ASSISTANT DIRECTOR, POLITICAL ACTION									
<p>Full Name (Last, First, Middle Initial) C. SETH M. JOHNSON</p> <p>Mailing Address 727 7th Street NE</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Washington</td> <td style="width: 33%;">State DC</td> <td style="width: 33%;">Zip Code 20002</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME INT'L</td> <td style="width: 66%;">Occupation ASSISTANT DIRECTOR, POLITICAL ACTION</td> </tr> </table> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 1074.30 </p>			City Washington	State DC	Zip Code 20002	Name of Employer AFSCME INT'L	Occupation ASSISTANT DIRECTOR, POLITICAL ACTION	<p>Date of Receipt 05 / 27 / 2014 Transaction ID : SA11AI.47535 </p> <p>Amount of Each Receipt this Period 107.43 </p>		
City Washington	State DC	Zip Code 20002								
Name of Employer AFSCME INT'L	Occupation ASSISTANT DIRECTOR, POLITICAL ACTION									
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			314.86							
<p>TOTAL This Period (last page this line number only)..... ▶</p>										

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 158 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. TERRA M. JOHNSON</p> <p>Mailing Address 807 Nome Avenue</p> <p>City Akron State OH Zip Code 44320</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4/AKRON SUMMIT Occupation TEACHER AIDE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 276.88</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.49073</p> <p>Amount of Each Receipt this Period 26.32</p>		
<p>Full Name (Last, First, Middle Initial) B. TERRA M. JOHNSON</p> <p>Mailing Address 807 Nome Avenue</p> <p>City Akron State OH Zip Code 44320</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4/AKRON SUMMIT Occupation TEACHER AIDE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 303.20</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.49074</p> <p>Amount of Each Receipt this Period 26.32</p>		
<p>Full Name (Last, First, Middle Initial) C. TERRA M. JOHNSON</p> <p>Mailing Address 807 Nome Avenue</p> <p>City Akron State OH Zip Code 44320</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4/AKRON SUMMIT Occupation TEACHER AIDE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 329.52</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 29 / 2014 Transaction ID : SA11AI.49075</p> <p>Amount of Each Receipt this Period 26.32</p>		
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			78.96		
<p>TOTAL This Period (last page this line number only)..... ▶</p>					

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

PAGE 159 OF 403

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. WINSTON JOHNSON

Mailing Address 14574 Longacre

City

Detroit

State

MI

Zip Code

48227-1448

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.96

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	8		2	0	1	4

Transaction ID : SA11AI.48203

Amount of Each Receipt this Period

29.12

Full Name (Last, First, Middle Initial)

B. WINSTON JOHNSON

Mailing Address 14574 Longacre

City

Detroit

State

MI

Zip Code

48227-1448

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.08

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	1	4

Transaction ID : SA11AI.48226

Amount of Each Receipt this Period

29.12

Full Name (Last, First, Middle Initial)

C. JOANN JOHNTONY

Mailing Address 973 Shannon Road

City

Girard

State

OH

Zip Code

44420

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/GIRARD CSD

Occupation

HEAD CUSTODIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.92

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	0		2	0	1	4

Transaction ID : SA11AI.48973

Amount of Each Receipt this Period

50.00

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

108.24

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 160 OF 403
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. JOANN JOHNTONY</p> <p>Mailing Address 973 Shannon Road</p> <p>City State Zip Code Girard OH 44420</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4/GIRARD CSD HEAD CUSTODIAN</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 263.16</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.48974</p> <p>Amount of Each Receipt this Period 19.24</p>	
<p>Full Name (Last, First, Middle Initial) B. JOANN JOHNTONY</p> <p>Mailing Address 973 Shannon Road</p> <p>City State Zip Code Girard OH 44420</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4/GIRARD CSD HEAD CUSTODIAN</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 282.40</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 29 / 2014 Transaction ID : SA11AI.48975</p> <p>Amount of Each Receipt this Period 19.24</p>	
<p>Full Name (Last, First, Middle Initial) C. GERARD P. JOLLY</p> <p>Mailing Address 2107 Twin Flower Circle</p> <p>City State Zip Code Grove City OH 43123</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 11/STATE OF OH FISCAL SPECIALIST I</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 360.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 02 / 2014 Transaction ID : SA11AI.48527</p> <p>Amount of Each Receipt this Period 40.00</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>78.48</p>	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

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

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

FOR LINE NUMBER:
(check only one)

PAGE 161 OF 403

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

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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. GERARD P. JOLLY

Mailing Address 2107 Twin Flower Circle

City State Zip Code
 Grove City OH 43123

FEC ID number of contributing
federal political committee.

C

Name of Employer
 AFSCME OH LOC 11/STATE OF OH

Occupation
 FISCAL SPECIALIST 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
 05 / 16 / 2014

Transaction ID : SA11AI.48547

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. GERARD P. JOLLY

Mailing Address 2107 Twin Flower Circle

City State Zip Code
 Grove City OH 43123

FEC ID number of contributing
federal political committee.

C

Name of Employer
 AFSCME OH LOC 11/STATE OF OH

Occupation
 FISCAL SPECIALIST I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 30 / 2014

Transaction ID : SA11AI.48567

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. GERALD E. JONES

Mailing Address 4320 NW Second Avenue

City State Zip Code
 Des Moines IA 50313

FEC ID number of contributing
federal political committee.

C

Name of Employer
 AFSCME IA CN 61/STATE OF IA

Occupation
 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
 05 / 14 / 2014

Transaction ID : SA11AI.47769

Amount of Each Receipt this Period

40.00

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

120.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 162 OF 403

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

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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. TOAYIA JONES

Mailing Address 7571 Bayview Club Drive
Apt. 2D

City State Zip Code
Indianapolis IN 46250

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

FIELD ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.79

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.47110

Amount of Each Receipt this Period

32.31

Full Name (Last, First, Middle Initial)

B. TOAYIA JONES

Mailing Address 7571 Bayview Club Drive
Apt. 2D

City State Zip Code
Indianapolis IN 46250

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

FIELD ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.10

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.47536

Amount of Each Receipt this Period

32.31

Full Name (Last, First, Middle Initial)

C. JACQUELINE L. JONES-WALSH

Mailing Address 12401 Renton Avenue S.
Apt. 307

City State Zip Code
Seattle WA 98178

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 23 / 2014

Transaction ID : SA11AI.48331

Amount of Each Receipt this Period

21.00

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

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

85.62

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

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

FOR LINE NUMBER:
(check only one)

PAGE 163 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. JAIME A. JORDAN</p> <p>Mailing Address 11522 ST. Route 588</p> <p>City Bidwell State OH Zip Code 45614</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4/GALLIPOLIS CITY Occupation CUSTODIAN</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 211.64</p>			<p>Date of Receipt 05 / 29 / 2014 Transaction ID : SA11AI.48978 </p> <p>Amount of Each Receipt this Period 19.24 </p>	
<p>Full Name (Last, First, Middle Initial) B. RACHEL JORDAN</p> <p>Mailing Address 7836 Peachmont Avenue NW</p> <p>City North Canton State OH Zip Code 44720</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 220.00</p>			<p>Date of Receipt 05 / 12 / 2014 Transaction ID : SA11AI.48051 </p> <p>Amount of Each Receipt this Period 20.00 </p>	
<p>Full Name (Last, First, Middle Initial) C. RACHEL JORDAN</p> <p>Mailing Address 7836 Peachmont Avenue NW</p> <p>City North Canton State OH Zip Code 44720</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 240.00</p>			<p>Date of Receipt 05 / 27 / 2014 Transaction ID : SA11AI.48103 </p> <p>Amount of Each Receipt this Period 20.00 </p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			59.24	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

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

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

FOR LINE NUMBER:
(check only one)

PAGE 164 OF 403

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

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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. RACHEL JORDAN

Mailing Address 7836 Peachmont Avenue NW

City State Zip Code
North Canton OH 44720

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 29 / 2014

Transaction ID : SA11AI.48156

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. CHARLES JURGONIS

Mailing Address 11704 Bobs Ford Road

City State Zip Code
Fairfax VA 22030

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

DIRECTOR, FINANCIAL SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

965.52

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 01 / 2014

Transaction ID : SA11AI.47416

Amount of Each Receipt this Period

135.88

Full Name (Last, First, Middle Initial)

C. CHARLES JURGONIS

Mailing Address 11704 Bobs Ford Road

City State Zip Code
Fairfax VA 22030

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

DIRECTOR, FINANCIAL SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1052.24

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.47111

Amount of Each Receipt this Period

86.72

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

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

242.60

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

 FOR LINE NUMBER:
 (check only one)

PAGE 165 OF 403

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. CHARLES JURGONIS

Mailing Address 11704 Bobs Ford Road

City

Fairfax

State

VA

Zip Code

22030

FEC ID number of contributing federal political committee.

Name of Employer

AFSCME INT'L

Occupation

DIRECTOR, FINANCIAL SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	7		2	0	1	4

Transaction ID : SA11AI.47537

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

B. KHALILAH KARIM

Mailing Address 158 Hood Circle

City

Decatur

State

GA

Zip Code

30030

FEC ID number of contributing federal political committee.

Name of Employer

AFSCME INT'L

Occupation

ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	7		2	0	1	4

Transaction ID : SA11AI.47538

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. MICHAEL KEAPPROTH

Mailing Address 1696 4th Avenue

City

Newport

State

MN

Zip Code

55055

FEC ID number of contributing federal political committee.

Name of Employer

AFSCME MN CN 5/STATE OF MN

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	1	4

Transaction ID : SA11AI.47871

Amount of Each Receipt this Period

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

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

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

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



SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 167 OF 403
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. DONALD JOSEPH KELLY

Mailing Address 23 Glen Drive

City	State	Zip Code
Troy	NY	12180

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME NY LOC 1000

Occupation

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
05	/	21	/	2014

Transaction ID : SA11AI.48897

Amount of Each Receipt this Period

19.24

Full Name (Last, First, Middle Initial)

B. ADRIENNE J. KERN

Mailing Address P.O. Box 44

City	State	Zip Code
Hawthorne	WI	54842

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MN CN 5/CN14

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	06	/	2014

Transaction ID : SA11AI.48602

Amount of Each Receipt this Period

56.08

Full Name (Last, First, Middle Initial)

C. JOANNE KICKEN

Mailing Address 271 W. Mason Avenue

City	State	Zip Code
Buckley	WA	98321

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	09	/	2014

Transaction ID : SA11AI.48289

Amount of Each Receipt this Period

27.00

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

102.32

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

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

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for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 168 OF 403

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. JOANNE KICKEN</p> <p>Mailing Address 271 W. Mason Avenue</p> <p>City State Zip Code Buckley WA 98321</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 264.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 23 / 2014 Transaction ID : SA11AI.48334</p> <p>Amount of Each Receipt this Period 27.00</p>		
<p>Full Name (Last, First, Middle Initial) B. LORI E. KIEF</p> <p>Mailing Address 4413 Doe Crossing Trail</p> <p>City State Zip Code Madison WI 53704</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME WI CN 40/CTY OF MADISON ADMINISTRATIVE CLERK</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 350.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 08 / 2014 Transaction ID : SA11AI.47913</p> <p>Amount of Each Receipt this Period 35.00</p>		
<p>Full Name (Last, First, Middle Initial) C. LORI E. KIEF</p> <p>Mailing Address 4413 Doe Crossing Trail</p> <p>City State Zip Code Madison WI 53704</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME WI CN 40/CTY OF MADISON ADMINISTRATIVE CLERK</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 385.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 21 / 2014 Transaction ID : SA11AI.47907</p> <p>Amount of Each Receipt this Period 35.00</p>		
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			97.00		
<p>TOTAL This Period (last page this line number only)..... ▶</p>					

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

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

FOR LINE NUMBER:
(check only one)

PAGE 169 OF 403

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

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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. MONA L. KING

Mailing Address 929 Rye Drive

City

La Plata

State

MD

Zip Code

20646

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

RECORDS OFFICE ASSISTANT

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

226.00

Date of Receipt

05 / 15 / 2014

Transaction ID : SA11AI.47113

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. MONA L. KING

Mailing Address 929 Rye Drive

City

La Plata

State

MD

Zip Code

20646

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

RECORDS OFFICE ASSISTANT

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

251.00

Date of Receipt

05 / 27 / 2014

Transaction ID : SA11AI.47539

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. DEIRDRE A. KIRKWOOD

Mailing Address 38128 Grant Drive

City

Palmdale

State

CA

Zip Code

93552

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME CA LOC 1199/COPE

Occupation

NURSE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

05 / 16 / 2014

Transaction ID : SA11AI.49071

Amount of Each Receipt this Period

40.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 170 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. RICHARD D. KITTS</p> <p>Mailing Address 1500 Marion Road</p> <p>City State Zip Code Bucyrus OH 44820</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 11/STATE OF OH HIGHWAY TECHNICIAN 1</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 220.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 30 / 2014 Transaction ID : SA11AI.48568</p> <p>Amount of Each Receipt this Period 21.00</p>		
<p>Full Name (Last, First, Middle Initial) B. MARGARET M. KIZINA</p> <p>Mailing Address 45 Linden Lane</p> <p>City State Zip Code Boyertown PA 19512</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME PA CN 13/STATE OF PA STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 260.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 30 / 2014 Transaction ID : SA11AI.48774</p> <p>Amount of Each Receipt this Period 40.00</p>		
<p>Full Name (Last, First, Middle Initial) C. CAROLYN KLINGLESMTIH</p> <p>Mailing Address 10700 Grecian Road</p> <p>City State Zip Code Louisville KY 40272</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L AREA ORGANIZING DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 949.14</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47114</p> <p>Amount of Each Receipt this Period 105.46</p>		
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>166.46</p>		
<p>TOTAL This Period (last page this line number only)..... ▶</p>					

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 403
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. CAROLYN KLINGLESMTIH</p> <p>Mailing Address 10700 Grecian Road</p> <p>City State Zip Code Louisville KY 40272</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L AREA ORGANIZING DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1054.60</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47540</p> <p>Amount of Each Receipt this Period 105.46</p>	
<p>Full Name (Last, First, Middle Initial) B. BRIAN W. KLOPP</p> <p>Mailing Address 4707 Calvert Road</p> <p>City State Zip Code College Park MD 20740</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L LABOR ECONOMIST III</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 397.53</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47115</p> <p>Amount of Each Receipt this Period 44.17</p>	
<p>Full Name (Last, First, Middle Initial) C. BRIAN W. KLOPP</p> <p>Mailing Address 4707 Calvert Road</p> <p>City State Zip Code College Park MD 20740</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L LABOR ECONOMIST III</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 441.70</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47541</p> <p>Amount of Each Receipt this Period 44.17</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>193.80</p>	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

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

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for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 172 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. MARCIA R. KNOX</p> <p>Mailing Address 1660 Newton Avenue</p> <p>City State Zip Code Dayton OH 45406</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH CN 8 REGIONAL DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 463.86</p>			<p>Date of Receipt 05 / 06 / 2014 Transaction ID : SA11AI.47813</p> <p>Amount of Each Receipt this Period 89.30</p>		
<p>Full Name (Last, First, Middle Initial) B. MARCIA R. KNOX</p> <p>Mailing Address 1660 Newton Avenue</p> <p>City State Zip Code Dayton OH 45406</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH CN 8 REGIONAL DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 468.86</p>			<p>Date of Receipt 05 / 19 / 2014 Transaction ID : SA11AI.49067</p> <p>Amount of Each Receipt this Period 5.00</p>		
<p>Full Name (Last, First, Middle Initial) C. KERRY KORPI</p> <p>Mailing Address 8913 First Avenue</p> <p>City State Zip Code Silver Spring MD 20910</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L/STATE STREET RETIREE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 307.17</p>			<p>Date of Receipt 05 / 01 / 2014 Transaction ID : SA11AI.47417</p> <p>Amount of Each Receipt this Period 102.39</p>		
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>196.69</p>		
<p>TOTAL This Period (last page this line number only)..... ▶</p>			<p></p>		

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

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

FOR LINE NUMBER:
(check only one)

PAGE 173 OF 403

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

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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. STEVEN J KOWALIK

Mailing Address 5431 Larchwood Lane

City State Zip Code
Toledo OH 43614

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH CN 8

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.72

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 06 / 2014

Transaction ID : SA11AI.47814

Amount of Each Receipt this Period

87.58

Full Name (Last, First, Middle Initial)

B. LYNN A. KRATZ

Mailing Address 326 Brentwood Drive
P.O. Box 8453

City State Zip Code
Cedar Rapids IA 52408

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME IA CN 61/STATE OF IA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 14 / 2014

Transaction ID : SA11AI.47770

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. STEVEN KREISBERG

Mailing Address 9954 Whitewater Drive

City State Zip Code
Burke VA 22015

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

DIRECTOR, RESEARCH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

619.47

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.47116

Amount of Each Receipt this Period

68.83

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

181.41

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:
(check only one)

PAGE 174 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. STEVEN KREISBERG</p> <p>Mailing Address 9954 Whitewater Drive</p> <p>City State Zip Code Burke VA 22015</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L DIRECTOR, RESEARCH</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 688.30</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47542</p> <p>Amount of Each Receipt this Period 688.30</p>	
<p>Full Name (Last, First, Middle Initial) B. RONALD D. KUCHLER</p> <p>Mailing Address P.O. Box 3019</p> <p>City State Zip Code Port Angeles WA 98362</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 351.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 09 / 2014 Transaction ID : SA11AI.48290</p> <p>Amount of Each Receipt this Period 39.00</p>	
<p>Full Name (Last, First, Middle Initial) C. RONALD D. KUCHLER</p> <p>Mailing Address P.O. Box 3019</p> <p>City State Zip Code Port Angeles WA 98362</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 390.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 23 / 2014 Transaction ID : SA11AI.48335</p> <p>Amount of Each Receipt this Period 39.00</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			146.83	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

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

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

FOR LINE NUMBER:
(check only one)

PAGE 175 OF 403

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

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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. LEANNE KUNZE

Mailing Address 8155 Scandia Road

City

Waconia

State

MN

Zip Code

55387

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MN CN 65

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.40

Date of Receipt

05 / 01 / 2014

Transaction ID : SA11AI.48442

Amount of Each Receipt this Period

69.88

Full Name (Last, First, Middle Initial)

B. LEANNE KUNZE

Mailing Address 8155 Scandia Road

City

Waconia

State

MN

Zip Code

55387

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MN CN 65

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

421.28

Date of Receipt

05 / 30 / 2014

Transaction ID : SA11AI.48451

Amount of Each Receipt this Period

69.88

Full Name (Last, First, Middle Initial)

C. FRANCIS M. LALLY III

Mailing Address 5 Vansant Rd., Deacon's Walk

City

Newark

State

DE

Zip Code

19711

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME DE CN 81

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.69

Date of Receipt

05 / 08 / 2014

Transaction ID : SA11AI.48016

Amount of Each Receipt this Period

65.34

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

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

205.10

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

 FOR LINE NUMBER:
 (check only one)

PAGE 176 OF 403

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. FRANCIS M. LALLY III

Mailing Address 5 Vansant Rd., Deacon's Walk

City

Newark

State

DE

Zip Code

19711

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME DE CN 81

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

339.03

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	4		

Transaction ID : SA11AI.48023

Amount of Each Receipt this Period

65.34

Full Name (Last, First, Middle Initial)

B. JOSE A. LALUZ JR.
Mailing Address 6255 Bent Pine Drive
Apt. 722A

City

Orlando

State

FL

Zip Code

32822

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

541.71

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	5			2	0	1	4		

Transaction ID : SA11AI.47118

Amount of Each Receipt this Period

60.19

Full Name (Last, First, Middle Initial)

C. JOSE A. LALUZ JR.
Mailing Address 6255 Bent Pine Drive
Apt. 722A

City

Orlando

State

FL

Zip Code

32822

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

601.90

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	7			2	0	1	4		

Transaction ID : SA11AI.47544

Amount of Each Receipt this Period

60.19

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

185.72

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:
(check only one)

PAGE 177 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. ANGELA LAMANNA</p> <p>Mailing Address 296 Churchmans Road</p> <p>City State Zip Code New Castle DE 19720</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME DE CN 81 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 240.91</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 08 / 2014 Transaction ID : SA11AI.48017</p> <p>Amount of Each Receipt this Period 57.98</p>		
<p>Full Name (Last, First, Middle Initial) B. ANGELA LAMANNA</p> <p>Mailing Address 296 Churchmans Road</p> <p>City State Zip Code New Castle DE 19720</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME DE CN 81 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 298.89</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 08 / 2014 Transaction ID : SA11AI.48024</p> <p>Amount of Each Receipt this Period 57.98</p>		
<p>Full Name (Last, First, Middle Initial) C. ELIZABETH D. LARSEN</p> <p>Mailing Address 900 Grant Street SW</p> <p>City State Zip Code Tumwater WA 98512</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME WA CN 28 DIRECTOR OF ADMINISTRATION</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 400.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 13 / 2014 Transaction ID : SA11AI.48336</p> <p>Amount of Each Receipt this Period 80.00</p>		
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>195.96</p>		
<p>TOTAL This Period (last page this line number only)..... ▶</p>					

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 403
 (check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. DONALD W. LARSON

Mailing Address 452 W Scott Street

City

Fond du Lac

State

WI

Zip Code

54937

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME WI CN 24/STATE OF WI

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	16	/	2014

Transaction ID : SA11AI.48420

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. SUSAN J. LARUE

Mailing Address 106 Haskell Drive

City

Lancaster

State

PA

Zip Code

17601

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME PA CN 13/STATE OF PA

Occupation

CLERICAL/ADMINISTRATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	30	/	2014

Transaction ID : SA11AI.48777

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. RHONDA L LATHON

Mailing Address 8521 Moon Glass Court

City

Columbia

State

MD

Zip Code

21045

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

BUSINESS ANALYST III

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

442.98

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	15	/	2014

Transaction ID : SA11AI.47119

Amount of Each Receipt this Period

49.22

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

114.22

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

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

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for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 179 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. RHONDA L LATHON</p> <p>Mailing Address 8521 Moon Glass Court</p> <p>City State Zip Code Columbia MD 21045</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L BUSINESS ANALYST III</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 492.20</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47545</p> <p>Amount of Each Receipt this Period 49.22</p>
<p>Full Name (Last, First, Middle Initial) B. JOSEPH LAWRENCE</p> <p>Mailing Address 2724 St. Paul Street #1</p> <p>City State Zip Code Baltimore MD 21218</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L COMMUNICATIONS SPECIALIST III</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 442.98</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47120</p> <p>Amount of Each Receipt this Period 49.22</p>
<p>Full Name (Last, First, Middle Initial) C. JOSEPH LAWRENCE</p> <p>Mailing Address 2724 St. Paul Street #1</p> <p>City State Zip Code Baltimore MD 21218</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L COMMUNICATIONS SPECIALIST III</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 492.20</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47546</p> <p>Amount of Each Receipt this Period 49.22</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		147.66
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

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

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

FOR LINE NUMBER:
(check only one)

PAGE 180 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. ROBIN C. LEDBETTER</p> <p>Mailing Address 12002 NE Roosevelt Way C-302</p> <p>City State Zip Code Seattle WA 98125</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME WA CN 28 COUNCIL REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 230.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 13 / 2014 Transaction ID : SA11AI.48337</p> <p>Amount of Each Receipt this Period 46.00</p>
<p>Full Name (Last, First, Middle Initial) B. ALAN L. LEE</p> <p>Mailing Address 1660 Peachtree NW #6406</p> <p>City State Zip Code Atlanta GA 30309</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L ASSISTANT TO REGIONAL DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 430.92</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47121</p> <p>Amount of Each Receipt this Period 48.21</p>
<p>Full Name (Last, First, Middle Initial) C. ALAN L. LEE</p> <p>Mailing Address 1660 Peachtree NW #6406</p> <p>City State Zip Code Atlanta GA 30309</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L ASSISTANT TO REGIONAL DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 479.13</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47547</p> <p>Amount of Each Receipt this Period 48.21</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		142.42
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

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 403
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. SUE C. LEE-ALLEN

Mailing Address 7935 SW Santolina Place

City

Beaverton

State

OR

Zip Code

97008-6272

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OR CN 75

Occupation

ORGANIZING DIRECTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	30	/	2014

Transaction ID : SA11AI.47921

Amount of Each Receipt this Period

70.00

Full Name (Last, First, Middle Initial)

B. ERIC N. LEHTOMailing Address 2122 West 2nd Street
Apt. #2

City

Duluth

State

MN

Zip Code

55086

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MN CN 5/CN14

Occupation

DIRECTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

526.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	06	/	2014

Transaction ID : SA11AI.48604

Amount of Each Receipt this Period

105.22

Full Name (Last, First, Middle Initial)

C. JACQUALINE D. LEISURE

Mailing Address 1600 28th Street NW

City

Canton

State

OH

Zip Code

44709

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/CANTON CITY

Occupation

COOK

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

213.07

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	12	/	2014

Transaction ID : SA11AI.48982

Amount of Each Receipt this Period

19.23

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

194.45

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:
(check only one)

PAGE 182 OF 403

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

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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. JACQUALINE D. LEISURE

Mailing Address 1600 28th Street NW

City State Zip Code
 Canton OH 44709

FEC ID number of contributing
federal political committee.

C

Name of Employer
 AFSCME OH LOC 4/CANTON CITY

Occupation
 COOK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.30

Date of Receipt

05 / 27 / 2014

Transaction ID : SA11AI.48983

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

B. JACQUALINE D. LEISURE

Mailing Address 1600 28th Street NW

City State Zip Code
 Canton OH 44709

FEC ID number of contributing
federal political committee.

C

Name of Employer
 AFSCME OH LOC 4/CANTON CITY

Occupation
 COOK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.53

Date of Receipt

05 / 29 / 2014

Transaction ID : SA11AI.48984

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

C. CHARLES E. LESTER

Mailing Address 2475 Chandler Avenue

City State Zip Code
 Las Vegas NV 89120

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSISTANT TO REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

457.99

Date of Receipt

05 / 15 / 2014

Transaction ID : SA11AI.47122

Amount of Each Receipt this Period

48.21

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

86.67

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 183 OF 403

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

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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. CHARLES E. LESTER

Mailing Address 2475 Chandler Avenue

City

Las Vegas

State

NV

Zip Code

89120

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSISTANT TO REGIONAL DIRECTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

506.20

Date of Receipt

05 / 27 / 2014

Transaction ID : SA11AI.47548

Amount of Each Receipt this Period

48.21

Full Name (Last, First, Middle Initial)

B. SUSAN T. LEVITAN

Mailing Address 2650 Worrell Court

City

Crofton

State

MD

Zip Code

21114

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, POLITICAL ACTION

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

458.01

Date of Receipt

05 / 15 / 2014

Transaction ID : SA11AI.47123

Amount of Each Receipt this Period

50.89

Full Name (Last, First, Middle Initial)

C. SUSAN T. LEVITAN

Mailing Address 2650 Worrell Court

City

Crofton

State

MD

Zip Code

21114

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, POLITICAL ACTION

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

508.90

Date of Receipt

05 / 27 / 2014

Transaction ID : SA11AI.47549

Amount of Each Receipt this Period

50.89

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

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

149.99

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

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

FOR LINE NUMBER:
(check only one)

PAGE 184 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. SARAH LEWERENZ</p> <p>Mailing Address 6997 West Van Road</p> <p>City State Zip Code Duluth MN 55803</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MN CN 65 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 391.90</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 01 / 2014 Transaction ID : SA11AI.48443</p> <p>Amount of Each Receipt this Period 74.38</p>	
<p>Full Name (Last, First, Middle Initial) B. SARAH LEWERENZ</p> <p>Mailing Address 6997 West Van Road</p> <p>City State Zip Code Duluth MN 55803</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MN CN 65 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 466.28</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 30 / 2014 Transaction ID : SA11AI.48452</p> <p>Amount of Each Receipt this Period 74.38</p>	
<p>Full Name (Last, First, Middle Initial) C. CORDELIA M. LEWIS</p> <p>Mailing Address P.O. Box 5149</p> <p>City State Zip Code Boston MA 02206-5149</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L/STATE STREET RETIREE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 535.71</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 01 / 2014 Transaction ID : SA11AI.47420</p> <p>Amount of Each Receipt this Period 100.00</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>248.76</p>	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 185 OF 403

(check only one)

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

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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. GREG LEWIS

Mailing Address 1816 E. 22nd Street

City

Des Moines

State

IA

Zip Code

50317

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME IA CN 61

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2014

Transaction ID : SA11AI.48873

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

B. MICHELE A. LEWIS-MUZZATTI

Mailing Address 3705 Adams Drive

City

Silver Spring

State

MD

Zip Code

20902

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

DIRECTOR, CONF & TRAVEL SVCS

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1121.94

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2014

Transaction ID : SA11AI.47124

Amount of Each Receipt this Period

124.66

Full Name (Last, First, Middle Initial)

C. MICHELE A. LEWIS-MUZZATTI

Mailing Address 3705 Adams Drive

City

Silver Spring

State

MD

Zip Code

20902

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

DIRECTOR, CONF & TRAVEL SVCS

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1246.60

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2014

Transaction ID : SA11AI.47550

Amount of Each Receipt this Period

124.66

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

309.32

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

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

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 186 OF 403

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

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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. VALERY LIGHT

Mailing Address 32 Barley Lane

City

Palmyra

State

PA

Zip Code

17078

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

401.80

Date of Receipt

05 / 12 / 2014

Transaction ID : SA11AI.47305

Amount of Each Receipt this Period

80.36

Full Name (Last, First, Middle Initial)

B. BRIAN J. LINDHOLT

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

AFSCME MN CN 5/STATE OF MN

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

319.00

Date of Receipt

05 / 28 / 2014

Transaction ID : SA11AI.47872

Amount of Each Receipt this Period

58.00

Full Name (Last, First, Middle Initial)

C. MICHAEL LINDHOLT

Mailing Address 2752 Randolph Street NE

City

Minneapolis

State

MN

Zip Code

55418-2622

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MN CN 5/STATE OF MN

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

660.00

Date of Receipt

05 / 28 / 2014

Transaction ID : SA11AI.47873

Amount of Each Receipt this Period

120.00

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

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

258.36

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 187 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. THERESA LIPKO</p> <p>Mailing Address 117 South Main Street</p> <p>City State Zip Code Carbondale PA 18407</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME PA CN 13 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 342.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.47306</p> <p>Amount of Each Receipt this Period 68.40</p>
<p>Full Name (Last, First, Middle Initial) B. TOM LIPKO</p> <p>Mailing Address 117 South Main Street</p> <p>City State Zip Code Carbondale PA 18407</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME PA CN 13 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 459.70</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.47307</p> <p>Amount of Each Receipt this Period 117.26</p>
<p>Full Name (Last, First, Middle Initial) C. COREY LOCKARD</p> <p>Mailing Address P.O. Box 22</p> <p>City State Zip Code Benton PA 17814</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME PA CN 13 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 627.10</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.47308</p> <p>Amount of Each Receipt this Period 117.42</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		<p>303.08</p>
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

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

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 188 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. KENNETH H LOEFFLER-KEMP</p> <p>Mailing Address 2902 Bald Eagle Trail</p> <p>City State Zip Code Duluth MN 55804</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MN CN 5 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 348.30</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 06 / 2014 Transaction ID : SA11AI.48605</p> <p>Amount of Each Receipt this Period 70.32</p>
<p>Full Name (Last, First, Middle Initial) B. JAMES N. LOMONACO</p> <p>Mailing Address 107 Wormwood Hill Road</p> <p>City State Zip Code Mansfield CT 06250-0000</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME CT CN 4/STATE OF CT VICE PRESIDENT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 225.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 05 / 2014 Transaction ID : SA11AI.47745</p> <p>Amount of Each Receipt this Period 25.00</p>
<p>Full Name (Last, First, Middle Initial) C. JAMES N. LOMONACO</p> <p>Mailing Address 107 Wormwood Hill Road</p> <p>City State Zip Code Mansfield CT 06250-0000</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME CT CN 4/STATE OF CT VICE PRESIDENT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 250.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 19 / 2014 Transaction ID : SA11AI.47746</p> <p>Amount of Each Receipt this Period 25.00</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		<p>120.32</p>
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

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 403
 (check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. PAUL LONG

Mailing Address P.O. Box 310864

City	State	Zip Code
Flint	MI	48531

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.19

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	08	/	2014

Transaction ID : SA11AI.48204

Amount of Each Receipt this Period

25.73

Full Name (Last, First, Middle Initial)

B. PAUL LONG

Mailing Address P.O. Box 310864

City	State	Zip Code
Flint	MI	48531

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.92

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	21	/	2014

Transaction ID : SA11AI.48227

Amount of Each Receipt this Period

25.73

Full Name (Last, First, Middle Initial)

C. RANDAL E. LORELLO

Mailing Address N 9203 James Court

City	State	Zip Code
Spokane	WA	99208

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME WA CN 28

Occupation

FIELD SUPERVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	13	/	2014

Transaction ID : SA11AI.48338

Amount of Each Receipt this Period

50.00

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

101.46

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:
(check only one)

PAGE 190 OF 403

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

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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. SABRINA LOVE

Mailing Address 23 Chadwick Drive

City State Zip Code
Stafford VA 22556

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ADMINISTRATIVE ASSISTANT I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.95

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.47125

Amount of Each Receipt this Period

24.55

Full Name (Last, First, Middle Initial)

B. SABRINA LOVE

Mailing Address 23 Chadwick Drive

City State Zip Code
Stafford VA 22556

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ADMINISTRATIVE ASSISTANT I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.50

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.47551

Amount of Each Receipt this Period

24.55

Full Name (Last, First, Middle Initial)

C. CHARLES M. LOVELESS

Mailing Address 2100 11th Street NW
#206

City State Zip Code
Washington DC 20001

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

DIRECTOR, FEDERAL GOVT AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

716.49

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.47126

Amount of Each Receipt this Period

79.61

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

128.71

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 191 OF 403

(check only one)

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

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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. CHARLES M. LOVELESS

 Mailing Address 2100 11th Street NW
 #206

 City State Zip Code
 Washington DC 20001

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

DIRECTOR, FEDERAL GOVT AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

796.10

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2014

Transaction ID : SA11AI.47552

Amount of Each Receipt this Period

79.61

Full Name (Last, First, Middle Initial)

B. GEORGE LOVELL

Mailing Address RR 3 Box 3403

 City State Zip Code
 Goshen VT 05733-0000

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

AFSCME MA CN 93

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.80

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2014

Transaction ID : SA11AI.48500

Amount of Each Receipt this Period

60.76

Full Name (Last, First, Middle Initial)

C. SALVATORE LUCIANO

Mailing Address 947 Bunker Hill Road

 City State Zip Code
 Watertown CT 06795-0000

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

AFSCME CT CN 4

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

556.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2014

Transaction ID : SA11AI.47899

Amount of Each Receipt this Period

100.00

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

240.37

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

240.37

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

 FOR LINE NUMBER: PAGE 192 OF 403
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial) A. SALVATORE LUCIANO		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.48381	
Mailing Address 947 Bunker Hill Road City Watertown State CT Zip Code 06795-0000		Amount of Each Receipt this Period 14.00	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME CT CN 4 Occupation EXECUTIVE DIRECTOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 570.00	
Full Name (Last, First, Middle Initial) B. WILLIAM LUCY		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 01 / 2014 Transaction ID : SA11AI.47421	
Mailing Address 1831 Sudbury Lane NW City Washington State DC Zip Code 20012-2202		Amount of Each Receipt this Period 183.20	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L/STATE STREET Occupation RETIREE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 895.36	
Full Name (Last, First, Middle Initial) C. DENISE ANN LUNA		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.47309	
Mailing Address 38 River Lane City Levittown State PA Zip Code 19055		Amount of Each Receipt this Period 47.46	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME PA CN 13 Occupation COURT CLERK ADMINISTRATOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 237.30	
SUBTOTAL of Receipts This Page (optional)..... ▶		244.66	
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 193 OF 403
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial) A. CHARLES H. LUNDY			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47127	
Mailing Address 2024 SW 173 Avenue			Amount of Each Receipt this Period 44.84	
City Miramar	State FL	Zip Code 33029		
FEC ID number of contributing federal political committee. C				
Name of Employer AFSCME INT'L		Occupation AREA ORGANIZING DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 401.66		
Full Name (Last, First, Middle Initial) B. CHARLES H. LUNDY			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47553	
Mailing Address 2024 SW 173 Avenue			Amount of Each Receipt this Period 44.84	
City Miramar	State FL	Zip Code 33029		
FEC ID number of contributing federal political committee. C				
Name of Employer AFSCME INT'L		Occupation AREA ORGANIZING DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 446.50		
Full Name (Last, First, Middle Initial) C. WILLIAM LURYE			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47128	
Mailing Address 17 Sherman Avenue			Amount of Each Receipt this Period 86.72	
City Takoma Park	State MD	Zip Code 20912		
FEC ID number of contributing federal political committee. C				
Name of Employer AFSCME INT'L		Occupation GENERAL COUNSEL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 780.48		
SUBTOTAL of Receipts This Page (optional)..... ▶			176.40	
TOTAL This Period (last page this line number only)..... ▶				

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

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 194 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. WILLIAM LURYE</p> <p>Mailing Address 17 Sherman Avenue</p> <p>City State Zip Code Takoma Park MD 20912</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L GENERAL COUNSEL</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 867.20 </p>			<p>Date of Receipt 05 / 27 / 2014 Transaction ID : SA11AI.47554 </p> <p>Amount of Each Receipt this Period 86.72 </p>	
<p>Full Name (Last, First, Middle Initial) B. JOHN A. LYALL</p> <p>Mailing Address 383 Ashmoore Circle East</p> <p>City State Zip Code Powell OH 43065</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH CN 8 PRESIDENT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 685.64 </p>			<p>Date of Receipt 05 / 06 / 2014 Transaction ID : SA11AI.47815 </p> <p>Amount of Each Receipt this Period 134.24 </p>	
<p>Full Name (Last, First, Middle Initial) C. JOHN A. LYALL</p> <p>Mailing Address 383 Ashmoore Circle East</p> <p>City State Zip Code Powell OH 43065</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH CN 8 PRESIDENT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 699.64 </p>			<p>Date of Receipt 05 / 27 / 2014 Transaction ID : SA11AI.48382 </p> <p>Amount of Each Receipt this Period 14.00 </p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			234.96	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

 FOR LINE NUMBER:
 (check only one)

PAGE 195 OF 403

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. ROBERTA LYNCH

Mailing Address 4650 N. Hermitage Street

City

Chicago

State

IL

Zip Code

60640

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME IL CN 31

Occupation

DEPUTY DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	27	/	2014

Transaction ID : SA11AI.48384

Amount of Each Receipt this Period

14.00

Full Name (Last, First, Middle Initial)

B. BRENDA L. MABE

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

AFSCME OH LOC 11/STATE OF OH

Occupation

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
05	/	30	/	2014

Transaction ID : SA11AI.48569

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. CHRISTOPHER A. MABE

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

AFSCME OH LOC 11/STATE OF OH

Occupation

CORRECTION SERGEANT/

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
05	/	02	/	2014

Transaction ID : SA11AI.48530

Amount of Each Receipt this Period

25.00

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:
(check only one)

PAGE 196 OF 403

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

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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. CHRISTOPHER A. MABE

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

AFSCME OH LOC 11/STATE OF OH

Occupation

CORRECTION SERGEANT/

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 16 / 2014

Transaction ID : SA11AI.48550

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. CHRISTOPHER A. MABE

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

AFSCME OH LOC 11/STATE OF OH

Occupation

CORRECTION SERGEANT/

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 30 / 2014

Transaction ID : SA11AI.48570

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. ANDRE J. MADTES

Mailing Address 625 SE 4th Court

City

Dania Beach

State

FL

Zip Code

33004

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.66

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.47555

Amount of Each Receipt this Period

37.11

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

87.11

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 197 OF 403
(check only one)

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

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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. JOHN MAGUIRE

Mailing Address 6800 N High ST

City State Zip Code
 Worthington OH 43085

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH CN 8

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.26

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 06 / 2014

Transaction ID : SA11AI.47817

Amount of Each Receipt this Period

51.58

Full Name (Last, First, Middle Initial)

B. MICHAEL P. MAGUIRE

Mailing Address 20 Duffield Drive

City State Zip Code
 Lititz PA 17543

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.80

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 12 / 2014

Transaction ID : SA11AI.47310

Amount of Each Receipt this Period

80.36

Full Name (Last, First, Middle Initial)

C. LOUIS J. MAHOLIC

Mailing Address 2726 Juno Place
 Apt. #2

City State Zip Code
 Fairlawn OH 44333

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH CN 8

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.50

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 06 / 2014

Transaction ID : SA11AI.47818

Amount of Each Receipt this Period

64.40

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

196.34

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

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

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for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 198 OF 403

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

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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. DEANGELO MALCOLM

Mailing Address 1034 N. Washington Avenue

City State Zip Code
Lansing MI 48906

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.96

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 08 / 2014

Transaction ID : SA11AI.48205

Amount of Each Receipt this Period

29.12

Full Name (Last, First, Middle Initial)

B. DEANGELO MALCOLM

Mailing Address 1034 N. Washington Avenue

City State Zip Code
Lansing MI 48906

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.08

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 21 / 2014

Transaction ID : SA11AI.48228

Amount of Each Receipt this Period

29.12

Full Name (Last, First, Middle Initial)

C. CONSTANCE A. MALO

Mailing Address 92-633 Nawa Street

City State Zip Code
Kapolei HI 96707

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME HI LOC 152

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 02 / 2014

Transaction ID : SA11AI.47978

Amount of Each Receipt this Period

50.00

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

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

108.24

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 403
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial) A. KATHRYN S. MALONE			Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.47403		
Mailing Address 988 Circle on the Green			Amount of Each Receipt this Period 100.00		
City Columbus	State OH	Zip Code 43235			
FEC ID number of contributing federal political committee. C					
Name of Employer AFSCME OH LOC 4		Occupation DIRECTOR, POLITICAL ACTION			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 503.52			
Full Name (Last, First, Middle Initial) B. KATHRYN S. MALONE			Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.48053		
Mailing Address 988 Circle on the Green			Amount of Each Receipt this Period 40.44		
City Columbus	State OH	Zip Code 43235			
FEC ID number of contributing federal political committee. C					
Name of Employer AFSCME OH LOC 4		Occupation DIRECTOR, POLITICAL ACTION			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 543.96			
Full Name (Last, First, Middle Initial) C. KATHRYN S. MALONE			Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.48105		
Mailing Address 988 Circle on the Green			Amount of Each Receipt this Period 40.44		
City Columbus	State OH	Zip Code 43235			
FEC ID number of contributing federal political committee. C					
Name of Employer AFSCME OH LOC 4		Occupation DIRECTOR, POLITICAL ACTION			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 584.40			
SUBTOTAL of Receipts This Page (optional)..... ▶			180.88		
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 200 OF 403
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 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. KATHRYN S. MALONE Full Name (Last, First, Middle Initial) Mailing Address 988 Circle on the Green City Columbus State OH Zip Code 43235 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH LOC 4 Occupation DIRECTOR, POLITICAL ACTION Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 624.84			Date of Receipt M M / D D / Y Y Y Y Y 05 / 29 / 2014 Transaction ID : SA11AI.48158 Amount of Each Receipt this Period 40.44
B. LARRY MALONE Full Name (Last, First, Middle Initial) Mailing Address 5185 Horseshoe Falls Drive City Dublin State OH Zip Code 43016 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 591.52			Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.47399 Amount of Each Receipt this Period 50.00
C. LARRY MALONE Full Name (Last, First, Middle Initial) Mailing Address 5185 Horseshoe Falls Drive City Dublin State OH Zip Code 43016 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 649.21			Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.48054 Amount of Each Receipt this Period 57.69
SUBTOTAL of Receipts This Page (optional)..... ▶			148.13
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:
(check only one)

PAGE 201 OF 403

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

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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. LARRY MALONE

Mailing Address 5185 Horseshoe Falls Drive

City State Zip Code
Dublin OH 43016

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

706.90

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.48106

Amount of Each Receipt this Period

57.69

Full Name (Last, First, Middle Initial)

B. LARRY MALONE

Mailing Address 5185 Horseshoe Falls Drive

City State Zip Code
Dublin OH 43016

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

764.59

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 29 / 2014

Transaction ID : SA11AI.48159

Amount of Each Receipt this Period

57.69

Full Name (Last, First, Middle Initial)

C. MOLLY MALONEY

Mailing Address 131 Mainhart Drive

City State Zip Code
Grass Valley CA 95945

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

PEOPLE CORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.23

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.47132

Amount of Each Receipt this Period

29.56

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

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

144.94

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 202 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. MOLLY MALONEY</p> <p>Mailing Address 131 Mainhart Drive</p> <p>City State Zip Code Grass Valley CA 95945</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L PEOPLE CORDINATOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 293.79</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47557</p> <p>Amount of Each Receipt this Period 29.56</p>
<p>Full Name (Last, First, Middle Initial) B. MARK MANDICH</p> <p>Mailing Address 315 South Park</p> <p>City State Zip Code Springfield MN 56087</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MN CN 65 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 381.30</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 01 / 2014 Transaction ID : SA11AI.48444</p> <p>Amount of Each Receipt this Period 72.26</p>
<p>Full Name (Last, First, Middle Initial) C. MARK MANDICH</p> <p>Mailing Address 315 South Park</p> <p>City State Zip Code Springfield MN 56087</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MN CN 65 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 453.56</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 30 / 2014 Transaction ID : SA11AI.48453</p> <p>Amount of Each Receipt this Period 72.26</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		<p>174.08</p>
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
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 Detailed Summary Page

FOR LINE NUMBER: PAGE 203 OF 403

(check only one)

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

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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. MANUEL MANGUAL

Mailing Address 417 Arizona Avenue

City

Bay Shore

State

NY

Zip Code

11706

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME NY LOC 1000/NYS INST.

Occupation

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
 05 / 29 / 2014

Transaction ID : SA11AI.48901

Amount of Each Receipt this Period

19.24

Full Name (Last, First, Middle Initial)

B. ANTONIO K. MANOR

Mailing Address 1911 East 62nd Street

City

Savannah

State

GA

Zip Code

31404

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ORGANIZER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.81

Date of Receipt

 M M / D D / Y Y Y Y Y
 05 / 15 / 2014

Transaction ID : SA11AI.47133

Amount of Each Receipt this Period

41.09

Full Name (Last, First, Middle Initial)

C. ANTONIO K. MANOR

Mailing Address 1911 East 62nd Street

City

Savannah

State

GA

Zip Code

31404

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ORGANIZER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.90

Date of Receipt

 M M / D D / Y Y Y Y Y
 05 / 27 / 2014

Transaction ID : SA11AI.47558

Amount of Each Receipt this Period

41.09

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

101.42

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:
(check only one)

PAGE 204 OF 403

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

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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. MATIAS MARIN

Mailing Address 2201 Broadway Street

City State Zip Code
Oakland CA 94612

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME CA LOC 3299

Occupation

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
05 / 21 / 2014

Transaction ID : SA11AI.48465

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

B. GARY MARTIN

Mailing Address 255 Trail East

City State Zip Code
Pataskala OH 43062

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

ASSOCIATE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 12 / 2014

Transaction ID : SA11AI.48055

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. GARY MARTIN

Mailing Address 255 Trail East

City State Zip Code
Pataskala OH 43062

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

ASSOCIATE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.48107

Amount of Each Receipt this Period

50.00

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

180.00

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:
(check only one)

PAGE 205 OF 403

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

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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. GARY MARTIN

Mailing Address 255 Trail East

City

Pataskala

State

OH

Zip Code

43062

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

ASSOCIATE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

590.00

Date of Receipt

05 / 29 / 2014

Transaction ID : SA11AI.48160

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. LISA G. MARTIN

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

AFSCME INT'L

Occupation

EXECUTIVE OFFICE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.55

Date of Receipt

05 / 15 / 2014

Transaction ID : SA11AI.47135

Amount of Each Receipt this Period

39.95

Full Name (Last, First, Middle Initial)

C. LISA G. MARTIN

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

AFSCME INT'L

Occupation

EXECUTIVE OFFICE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.50

Date of Receipt

05 / 27 / 2014

Transaction ID : SA11AI.47560

Amount of Each Receipt this Period

39.95

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

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

129.90

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

PAGE 206 OF 403

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. PAULA MARTINEZ

Mailing Address 3963 200th Avenue

City

Carlisle

State

IA

Zip Code

50047

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME IA CN 61/STATE OF IA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	4		2	0	1	4

Transaction ID : SA11AI.47771

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. KIMBERLY A. MASSENGILL-BERNARDIN

Mailing Address 8000 Brookpoint Place

City

Westerville

State

OH

Zip Code

43081

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH CN 8

Occupation

ASSOCIATE COUNSEL

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

357.80

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	6		2	0	1	4

Transaction ID : SA11AI.47819

Amount of Each Receipt this Period

71.90

Full Name (Last, First, Middle Initial)

C. ROBERT E. MASTERS

Mailing Address 3407 4th Street

City

Union Gap

State

WA

Zip Code

98903

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

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
0	5		2	3		2	0	1	4

Transaction ID : SA11AI.48339

Amount of Each Receipt this Period

21.00

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

122.90

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 207 OF 403

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. JILLIAN P. MATUNDAN</p> <p>Mailing Address 134 North Pine Avenue</p> <p>City Albany State NY Zip Code 12203</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation ASSIST. DIRECTOR, ORGANIZNG & FLD SV</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 565.17</p>			<p>Date of Receipt 05 / 15 / 2014 Transaction ID : SA11AI.47137 </p> <p>Amount of Each Receipt this Period 63.17</p>	
<p>Full Name (Last, First, Middle Initial) B. JILLIAN P. MATUNDAN</p> <p>Mailing Address 134 North Pine Avenue</p> <p>City Albany State NY Zip Code 12203</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation ASSIST. DIRECTOR, ORGANIZNG & FLD SV</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 628.34</p>			<p>Date of Receipt 05 / 27 / 2014 Transaction ID : SA11AI.47562 </p> <p>Amount of Each Receipt this Period 63.17</p>	
<p>Full Name (Last, First, Middle Initial) C. MATTHEW MAYERS</p> <p>Mailing Address 1833 Ontario Place NW</p> <p>City Washington State DC Zip Code 20009</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation MANAGER, STRATEGIC RESEARCH</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 429.39</p>			<p>Date of Receipt 05 / 15 / 2014 Transaction ID : SA11AI.47138 </p> <p>Amount of Each Receipt this Period 47.71</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			174.05	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

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

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

FOR LINE NUMBER: PAGE 208 OF 403
(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

<p>Full Name (Last, First, Middle Initial) A. MATTHEW MAYERS</p> <p>Mailing Address 1833 Ontario Place NW</p> <p>City Washington State DC Zip Code 20009</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation MANAGER, STRATEGIC RESEARCH</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 477.10</p>			<p>Date of Receipt 05 / 27 / 2014 Transaction ID : SA11AI.47563</p> <p>Amount of Each Receipt this Period 47.71</p>	
<p>Full Name (Last, First, Middle Initial) B. MARCELLA MAYS-WATT</p> <p>Mailing Address 1686 Randall Avenue</p> <p>City Bronx State NY Zip Code 10473</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME NY LOC 1000/LOCAL 10 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 480.00</p>			<p>Date of Receipt 05 / 01 / 2014 Transaction ID : SA11AI.47910</p> <p>Amount of Each Receipt this Period 300.00</p>	
<p>Full Name (Last, First, Middle Initial) C. MARCELLA MAYS-WATT</p> <p>Mailing Address 1686 Randall Avenue</p> <p>City Bronx State NY Zip Code 10473</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME NY LOC 1000/LOCAL 10 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 540.00</p>			<p>Date of Receipt 05 / 12 / 2014 Transaction ID : SA11AI.47911</p> <p>Amount of Each Receipt this Period 60.00</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>407.71</p>	
<p>TOTAL This Period (last page this line number only)..... ▶</p>			<p></p>	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 209 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 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. MARCELLA MAYS-WATT Full Name (Last, First, Middle Initial) Mailing Address 1686 Randall Avenue City Bronx State NY Zip Code 10473 FEC ID number of contributing federal political committee. C Name of Employer AFSCME NY LOC 1000/LOCAL 10 Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00		Date of Receipt M M / D D / Y Y Y Y Y 05 / 22 / 2014 Transaction ID : SA11AI.47912 Amount of Each Receipt this Period 60.00
B. JEFF MAZUR Full Name (Last, First, Middle Initial) Mailing Address 503 Redwing Drive City Ashland State MO Zip Code 65010 FEC ID number of contributing federal political committee. C Name of Employer AFSCME MO CN 72 Occupation COUNCIL DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 318.78		Date of Receipt M M / D D / Y Y Y Y Y 05 / 08 / 2014 Transaction ID : SA11AI.48185 Amount of Each Receipt this Period 35.42
C. JEFF MAZUR Full Name (Last, First, Middle Initial) Mailing Address 503 Redwing Drive City Ashland State MO Zip Code 65010 FEC ID number of contributing federal political committee. C Name of Employer AFSCME MO CN 72 Occupation COUNCIL DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 354.20		Date of Receipt M M / D D / Y Y Y Y Y 05 / 21 / 2014 Transaction ID : SA11AI.48435 Amount of Each Receipt this Period 35.42
SUBTOTAL of Receipts This Page (optional)..... ▶		130.84
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 210 OF 403
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. ELISSA MCBRIDE</p> <p>Mailing Address 9 Sherman Avenue</p> <p>City State Zip Code Takoma Park MD 20912</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L DIRECTOR, EDUCATION</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1007.64</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 15 / 2014</p> <p>Transaction ID : SA11AI.47139</p> <p>Amount of Each Receipt this Period 111.96</p>	
<p>Full Name (Last, First, Middle Initial) B. ELISSA MCBRIDE</p> <p>Mailing Address 9 Sherman Avenue</p> <p>City State Zip Code Takoma Park MD 20912</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L DIRECTOR, EDUCATION</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1119.60</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014</p> <p>Transaction ID : SA11AI.47564</p> <p>Amount of Each Receipt this Period 111.96</p>	
<p>Full Name (Last, First, Middle Initial) C. CYNTHIA R. MCCABE</p> <p>Mailing Address 4608 Harvard Road</p> <p>City State Zip Code College Park MD 20740</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L ASSOCIATE DIRECTOR, COMMUNICATIONS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 501.05</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 15 / 2014</p> <p>Transaction ID : SA11AI.47140</p> <p>Amount of Each Receipt this Period 55.19</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			279.11	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

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

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

FOR LINE NUMBER:
(check only one)

PAGE 211 OF 403

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

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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. CYNTHIA R. MCCABE

Mailing Address 4608 Harvard Road

City

College Park

State

MD

Zip Code

20740

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, COMMUNICATIONS

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

556.24

Date of Receipt

05 / 27 / 2014

Transaction ID : SA11AI.47565

Amount of Each Receipt this Period

55.19

Full Name (Last, First, Middle Initial)

B. BOYD B. MCCAMISH

Mailing Address 1004 Woodtown Drive

City

Gahanna

State

OH

Zip Code

43230

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

FIELD EDUCATION COORDINATOR II

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

409.32

Date of Receipt

05 / 15 / 2014

Transaction ID : SA11AI.47141

Amount of Each Receipt this Period

45.48

Full Name (Last, First, Middle Initial)

C. BOYD B. MCCAMISH

Mailing Address 1004 Woodtown Drive

City

Gahanna

State

OH

Zip Code

43230

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

FIELD EDUCATION COORDINATOR II

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

455.44

Date of Receipt

05 / 27 / 2014

Transaction ID : SA11AI.47566

Amount of Each Receipt this Period

46.12

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

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

146.79

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

 FOR LINE NUMBER: PAGE 212 OF 403
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial) A. MARGARET MCCANN			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td> <td>1</td><td>5</td><td></td> <td>2</td><td>0</td><td>1</td><td>4</td> </tr> </table> Transaction ID : SA11AI.47142			M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	5		2	0	1	4
M	M	/	D	D	/	Y	Y	Y	Y																
0	5		1	5		2	0	1	4																
Mailing Address 103 Lynnmere Drive			Amount of Each Receipt this Period <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>61.90</td> </tr> </table>																						61.90
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City Silver Spring	State MD	Zip Code 20901																							
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C																									
Name of Employer AFSCME INT'L		Occupation ASSOCIATE GENERAL COUNSEL II																							
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>557.10</td> </tr> </table>																							557.10
									557.10																
Full Name (Last, First, Middle Initial) B. MARGARET MCCANN			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td> <td>2</td><td>7</td><td></td> <td>2</td><td>0</td><td>1</td><td>4</td> </tr> </table> Transaction ID : SA11AI.47567			M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	7		2	0	1	4
M	M	/	D	D	/	Y	Y	Y	Y																
0	5		2	7		2	0	1	4																
Mailing Address 103 Lynnmere Drive			Amount of Each Receipt this Period <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>61.90</td> </tr> </table>																						61.90
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City Silver Spring	State MD	Zip Code 20901																							
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Name of Employer AFSCME INT'L		Occupation ASSOCIATE GENERAL COUNSEL II																							
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>619.00</td> </tr> </table>																							619.00
									619.00																
Full Name (Last, First, Middle Initial) C. ANDY MCCANTS			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td> <td>2</td><td>3</td><td></td> <td>2</td><td>0</td><td>1</td><td>4</td> </tr> </table> Transaction ID : SA11AI.48340			M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	3		2	0	1	4
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0	5		2	3		2	0	1	4																
Mailing Address 1210 195th Street E.			Amount of Each Receipt this Period <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>21.00</td> </tr> </table>																						21.00
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City Spanaway	State WA	Zip Code 98387																							
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Name of Employer AFSCME WA CN 28/STATE OF WA		Occupation STAFF REPRESENTATIVE																							
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>210.00</td> </tr> </table>																							210.00
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SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 213 OF 403

(check only one)

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

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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. SUZANNE MCCORMICK

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

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.50

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 12 / 2014

Transaction ID : SA11AI.47313

Amount of Each Receipt this Period

73.90

Full Name (Last, First, Middle Initial)

B. BRIAN P. MCDONNELL

Mailing Address 56 Chestnut Lane

City

Niskayuna

State

NY

Zip Code

12309

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, POLITICAL ACTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

483.39

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.47143

Amount of Each Receipt this Period

53.71

Full Name (Last, First, Middle Initial)

C. BRIAN P. MCDONNELL

Mailing Address 56 Chestnut Lane

City

Niskayuna

State

NY

Zip Code

12309

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, POLITICAL ACTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

537.10

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.47568

Amount of Each Receipt this Period

53.71

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

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

181.32

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

 FOR LINE NUMBER:
 (check only one)

PAGE 214 OF 403

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. GERALD MCENTEE
 Mailing Address 800 25th Street NW
 Apt. #406

City	State	Zip Code
Washington	DC	20037-2207

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L/STATE STREET

Occupation

RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

689.69

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			01			2014			

Transaction ID : SA11AI.47423

Amount of Each Receipt this Period

139.27

Full Name (Last, First, Middle Initial)

B. JERI MCEWEN

Mailing Address 4031 Executive Park Drive

City	State	Zip Code
Harrisburg	PA	17111-1599

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			12			2014			

Transaction ID : SA11AI.47314

Amount of Each Receipt this Period

49.40

Full Name (Last, First, Middle Initial)

C. NANCY MCGOVERN

Mailing Address 8 Beacon Street

City	State	Zip Code
Boston	MA	02108-0000

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME MA CN 93

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			08			2014			

Transaction ID : SA11AI.48502

Amount of Each Receipt this Period

50.00

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

238.67

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

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

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

FOR LINE NUMBER: PAGE 215 OF 403
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. FREDERICK A. MCGRAW</p> <p>Mailing Address 1258 Somerset Way</p> <p>City Pickerington State OH Zip Code 43147</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4 Occupation EDUCATION & RESEARCH DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 300.00</p>			<p>Date of Receipt 05 / 20 / 2014</p> <p>Transaction ID : SA11AI.48985</p> <p>Amount of Each Receipt this Period 50.00</p>	
<p>Full Name (Last, First, Middle Initial) B. LYNNE E. MCGRAW</p> <p>Mailing Address 1258 Smerset way</p> <p>City Pickerington State OH Zip Code 43147</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4 Occupation DIRECTOR OF ACCOUNTING</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 445.00</p>			<p>Date of Receipt 05 / 12 / 2014</p> <p>Transaction ID : SA11AI.48056</p> <p>Amount of Each Receipt this Period 35.00</p>	
<p>Full Name (Last, First, Middle Initial) C. LYNNE E. MCGRAW</p> <p>Mailing Address 1258 Smerset way</p> <p>City Pickerington State OH Zip Code 43147</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4 Occupation DIRECTOR OF ACCOUNTING</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 480.00</p>			<p>Date of Receipt 05 / 27 / 2014</p> <p>Transaction ID : SA11AI.48986</p> <p>Amount of Each Receipt this Period 35.00</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>120.00</p>	
<p>TOTAL This Period (last page this line number only)..... ▶</p>			<p></p>	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 216 OF 403

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

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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. LYNNE E. MCGRAW

Mailing Address 1258 Smersset way

City

Pickerington

State

OH

Zip Code

43147

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

DIRECTOR OF ACCOUNTING

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.00

Date of Receipt

05 / 29 / 2014

Transaction ID : SA11AI.48161

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

B. CHAD MCKENNA

Mailing Address 623 N. 39th Avenue W.

City

Duluth

State

MN

Zip Code

56817

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MN CN 5

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.46

Date of Receipt

05 / 06 / 2014

Transaction ID : SA11AI.48606

Amount of Each Receipt this Period

46.20

Full Name (Last, First, Middle Initial)

C. KRISTEN E. MCKINLEY

Mailing Address 3656 Cannongate Drive

City

Columbus

State

OH

Zip Code

43228

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

STAFF ATTORNEY

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

05 / 29 / 2014

Transaction ID : SA11AI.48162

Amount of Each Receipt this Period

19.24

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

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

100.44

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 217 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. PETER M. MCLINDEN</p> <p>Mailing Address 935 Pamela Road</p> <p>City State Zip Code Cincinnati OH 45255</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH CN 8 ASSOCIATE COUNSEL</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 435.73</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 06 / 2014 Transaction ID : SA11AI.47820</p> <p>Amount of Each Receipt this Period 87.58</p>		
<p>Full Name (Last, First, Middle Initial) B. EDWARD MCNEIL</p> <p>Mailing Address 2546 Edison</p> <p>City State Zip Code Detroit MI 48206</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MI CN 25 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 328.08</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 08 / 2014 Transaction ID : SA11AI.48206</p> <p>Amount of Each Receipt this Period 41.01</p>		
<p>Full Name (Last, First, Middle Initial) C. EDWARD MCNEIL</p> <p>Mailing Address 2546 Edison</p> <p>City State Zip Code Detroit MI 48206</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MI CN 25 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 369.09</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 21 / 2014 Transaction ID : SA11AI.48229</p> <p>Amount of Each Receipt this Period 41.01</p>		
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>169.60</p>		
<p>TOTAL This Period (last page this line number only)..... ▶</p>					

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 218 OF 403

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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

<p>Full Name (Last, First, Middle Initial) A. YOLANDA MEDINA</p> <p>Mailing Address 8 Ralph Street Apt. 1</p> <p>City Bergenfield State NJ Zip Code 07621-0000</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation FIELD EDUCATION COORDINATOR II</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 409.32</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 15 / 2014</p> <p>Transaction ID : SA11AI.47144</p> <p>Amount of Each Receipt this Period 45.48</p>
<p>Full Name (Last, First, Middle Initial) B. YOLANDA MEDINA</p> <p>Mailing Address 8 Ralph Street Apt. 1</p> <p>City Bergenfield State NJ Zip Code 07621-0000</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation FIELD EDUCATION COORDINATOR II</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 454.80</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014</p> <p>Transaction ID : SA11AI.47569</p> <p>Amount of Each Receipt this Period 45.48</p>
<p>Full Name (Last, First, Middle Initial) C. DONALD MEHREN</p> <p>Mailing Address 6925 Woodland Blvd.</p> <p>City Minnesota City State MN Zip Code 55959</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME MN CN 5/STATE OF MN Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 330.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 28 / 2014</p> <p>Transaction ID : SA11AI.47874</p> <p>Amount of Each Receipt this Period 60.00</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		<p>150.96</p>
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

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

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 219 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. NANINE MEIKLEJOHN</p> <p>Mailing Address 4909 Aurora Drive</p> <p>City Kensington State MD Zip Code 20895</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation LEGISLATIVE AFFAIRS SPECIALIST III</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 442.98</p>			<p>Date of Receipt 05 / 15 / 2014 Transaction ID : SA11AI.47145 </p> <p>Amount of Each Receipt this Period 49.22 </p>	
<p>Full Name (Last, First, Middle Initial) B. NANINE MEIKLEJOHN</p> <p>Mailing Address 4909 Aurora Drive</p> <p>City Kensington State MD Zip Code 20895</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation LEGISLATIVE AFFAIRS SPECIALIST III</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 492.20</p>			<p>Date of Receipt 05 / 27 / 2014 Transaction ID : SA11AI.47570 </p> <p>Amount of Each Receipt this Period 49.22 </p>	
<p>Full Name (Last, First, Middle Initial) C. MARGARET MERDLER</p> <p>Mailing Address 1110 Driveumlin Drive</p> <p>City Verona State WI Zip Code 53593</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME WI CN 24 Occupation FIELD REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 294.58</p>			<p>Date of Receipt 05 / 02 / 2014 Transaction ID : SA11AI.48407 </p> <p>Amount of Each Receipt this Period 53.56 </p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>152.00</p>	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

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

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 220 OF 403

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

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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. MICHAEL J. MESSINA

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

AFSCME INT'L

Occupation

LABOR ECONOMIST III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

376.50

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.47147

Amount of Each Receipt this Period

52.28

Full Name (Last, First, Middle Initial)

B. MICHAEL J. MESSINA

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

AFSCME INT'L

Occupation

LABOR ECONOMIST III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

428.78

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.47572

Amount of Each Receipt this Period

52.28

Full Name (Last, First, Middle Initial)

C. CINDY A. MICHAEL

Mailing Address 331 Central Parkway

City

Warren

State

OH

Zip Code

44483

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH CN 8

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.50

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 06 / 2014

Transaction ID : SA11AI.47822

Amount of Each Receipt this Period

64.40

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

168.96

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

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

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 221 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 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. GLENARD MIDDLETON Full Name (Last, First, Middle Initial) Mailing Address 5108 Yellowwood Avenue City Baltimore State MD Zip Code 21209-4611 FEC ID number of contributing federal political committee. C Name of Employer AFSCME MD CN 67 Occupation EXECUTIVE DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1770.00			Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.48385 Amount of Each Receipt this Period 14.00
B. ARTHUR MILLER Full Name (Last, First, Middle Initial) Mailing Address 911 White Avenue City Cloquet State MN Zip Code 55720 FEC ID number of contributing federal political committee. C Name of Employer AFSCME MN CN 5/STATE OF MN Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00			Date of Receipt M M / D D / Y Y Y Y Y 05 / 28 / 2014 Transaction ID : SA11AI.47875 Amount of Each Receipt this Period 40.00
C. TIMOTHY MILLER Full Name (Last, First, Middle Initial) Mailing Address 2724 Pine Avenue City Altoona State PA Zip Code 16601 FEC ID number of contributing federal political committee. C Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 369.50			Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.47315 Amount of Each Receipt this Period 73.90
SUBTOTAL of Receipts This Page (optional)..... ▶			127.90
TOTAL This Period (last page this line number only)..... ▶			

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

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 222 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. HAROLD F. MITCHELL</p> <p>Mailing Address 3999 Kensingwood Drive</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Columbus</td> <td style="width: 33%;">State OH</td> <td style="width: 33%;">Zip Code 43230</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME OH CN 8</td> <td style="width: 66%;">Occupation ASSISTANT ORGANIZING DIRECTOR</td> </tr> </table> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 570.99</p>			City Columbus	State OH	Zip Code 43230	Name of Employer AFSCME OH CN 8	Occupation ASSISTANT ORGANIZING DIRECTOR	<p>Date of Receipt 05 / 06 / 2014</p> <p>Transaction ID : SA11AI.47823</p> <p>Amount of Each Receipt this Period 119.25</p>	
City Columbus	State OH	Zip Code 43230							
Name of Employer AFSCME OH CN 8	Occupation ASSISTANT ORGANIZING DIRECTOR								
<p>Full Name (Last, First, Middle Initial) B. KELLY L. MOBLEY</p> <p>Mailing Address 3739 Elmlawn Drive</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Toledo</td> <td style="width: 33%;">State OH</td> <td style="width: 33%;">Zip Code 43614</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME OH LOC 4</td> <td style="width: 66%;">Occupation FIELD REPRESENTATIVE</td> </tr> </table> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 346.23</p>			City Toledo	State OH	Zip Code 43614	Name of Employer AFSCME OH LOC 4	Occupation FIELD REPRESENTATIVE	<p>Date of Receipt 05 / 12 / 2014</p> <p>Transaction ID : SA11AI.48059</p> <p>Amount of Each Receipt this Period 38.47</p>	
City Toledo	State OH	Zip Code 43614							
Name of Employer AFSCME OH LOC 4	Occupation FIELD REPRESENTATIVE								
<p>Full Name (Last, First, Middle Initial) C. KELLY L. MOBLEY</p> <p>Mailing Address 3739 Elmlawn Drive</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Toledo</td> <td style="width: 33%;">State OH</td> <td style="width: 33%;">Zip Code 43614</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME OH LOC 4</td> <td style="width: 66%;">Occupation FIELD REPRESENTATIVE</td> </tr> </table> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 396.23</p>			City Toledo	State OH	Zip Code 43614	Name of Employer AFSCME OH LOC 4	Occupation FIELD REPRESENTATIVE	<p>Date of Receipt 05 / 20 / 2014</p> <p>Transaction ID : SA11AI.49052</p> <p>Amount of Each Receipt this Period 50.00</p>	
City Toledo	State OH	Zip Code 43614							
Name of Employer AFSCME OH LOC 4	Occupation FIELD REPRESENTATIVE								
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			207.72						
<p>TOTAL This Period (last page this line number only)..... ▶</p>									

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

PAGE 223 OF 403

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

A. KELLY L. MOBLEY Full Name (Last, First, Middle Initial) Mailing Address 3739 Elmlawn Drive City Toledo State OH Zip Code 43614 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 434.70			Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.48111 Amount of Each Receipt this Period 38.47
B. KELLY L. MOBLEY Full Name (Last, First, Middle Initial) Mailing Address 3739 Elmlawn Drive City Toledo State OH Zip Code 43614 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 473.17			Date of Receipt M M / D D / Y Y Y Y Y 05 / 29 / 2014 Transaction ID : SA11AI.48164 Amount of Each Receipt this Period 38.47
C. MATTHEW J. MOLEK Full Name (Last, First, Middle Initial) Mailing Address 29140 Barjode Road City Willowick State OH Zip Code 44095 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH LOC 4/WICKLIFFE CSD Occupation CUSTODIAN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 206.72			Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.48988 Amount of Each Receipt this Period 40.00
SUBTOTAL of Receipts This Page (optional)..... ▶			116.94
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:
 (check only one)

PAGE 224 OF 403

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial) A. MATTHEW J. MOLEK			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.48989		
Mailing Address 29140 Barjode Road			Amount of Each Receipt this Period 41.68		
City Willowick	State OH	Zip Code 44095			
FEC ID number of contributing federal political committee. C					
Name of Employer AFSCME OH LOC 4/WICKLIFFE CSD		Occupation CUSTODIAN			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 248.40			
Full Name (Last, First, Middle Initial) B. MATTHEW J. MOLEK			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 29 / 2014 Transaction ID : SA11AI.48990		
Mailing Address 29140 Barjode Road			Amount of Each Receipt this Period 41.68		
City Willowick	State OH	Zip Code 44095			
FEC ID number of contributing federal political committee. C					
Name of Employer AFSCME OH LOC 4/WICKLIFFE CSD		Occupation CUSTODIAN			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 290.08			
Full Name (Last, First, Middle Initial) C. TRINA MOLNAR			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.47402		
Mailing Address 14-8 Meadowlawn Drive			Amount of Each Receipt this Period 150.00		
City Mentor	State OH	Zip Code 44060			
FEC ID number of contributing federal political committee. C					
Name of Employer AFSCME OH LOC 4		Occupation FIELD REPRESENTATIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 418.00			
SUBTOTAL of Receipts This Page (optional)..... ▶			233.36		
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:
(check only one)

PAGE 225 OF 403

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

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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. TRINA MOLNAR

Mailing Address 14-8 Meadowlawn Drive

City State Zip Code
Mentor OH 44060

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 4

Occupation
FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.50

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 12 / 2014

Transaction ID : SA11AI.48060

Amount of Each Receipt this Period

33.50

Full Name (Last, First, Middle Initial)

B. TRINA MOLNAR

Mailing Address 14-8 Meadowlawn Drive

City State Zip Code
Mentor OH 44060

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 4

Occupation
FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

551.50

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 20 / 2014

Transaction ID : SA11AI.49053

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. TRINA MOLNAR

Mailing Address 14-8 Meadowlawn Drive

City State Zip Code
Mentor OH 44060

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 4

Occupation
FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.48112

Amount of Each Receipt this Period

33.50

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

167.00

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:
(check only one)

PAGE 226 OF 403

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

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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. TRINA MOLNAR

Mailing Address 14-8 Meadowlawn Drive

City State Zip Code
Mentor OH 44060

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

618.50

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 29 / 2014

Transaction ID : SA11AI.48165

Amount of Each Receipt this Period

33.50

Full Name (Last, First, Middle Initial)

B. KAREN MOMBERGER

Mailing Address 102 Manor Road

City State Zip Code
New Kensington PA 15068

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

498.30

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 12 / 2014

Transaction ID : SA11AI.47317

Amount of Each Receipt this Period

99.66

Full Name (Last, First, Middle Initial)

C. DOUGLAS MOORE

Mailing Address 10176 Foothill Court

City State Zip Code
Spring Valley CA 91977

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME CA LOC 3930

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.48386

Amount of Each Receipt this Period

14.00

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

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

147.16

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

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for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 227 OF 403

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

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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. ERIC D. MOORE

Mailing Address 810 Wildwood Drive
Apt 22

City State Zip Code
Jefferson City MO 65109

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MO CN 72

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.50

Date of Receipt

MM / DD / YYYY
05 / 08 / 2014

Transaction ID : SA11AI.48188

Amount of Each Receipt this Period

22.50

Full Name (Last, First, Middle Initial)

B. ERIC D. MOORE

Mailing Address 810 Wildwood Drive
Apt 22

City State Zip Code
Jefferson City MO 65109

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MO CN 72

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

MM / DD / YYYY
05 / 21 / 2014

Transaction ID : SA11AI.48438

Amount of Each Receipt this Period

22.50

Full Name (Last, First, Middle Initial)

C. FRANCIS MORONEY

Mailing Address 14 Jamaica Road

City State Zip Code
Brookline MA 02146-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MA CN 93

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY
05 / 08 / 2014

Transaction ID : SA11AI.48504

Amount of Each Receipt this Period

50.00

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

95.00

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

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

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for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 228 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. BRENDA MORRIS</p> <p>Mailing Address 28 Beth Drive</p> <p>City State Zip Code Fairchance PA 15436</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME PA CN 13 ORGANIZER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 369.50</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.47318</p> <p>Amount of Each Receipt this Period 73.90</p>		
<p>Full Name (Last, First, Middle Initial) B. RACHEL C. MORROW</p> <p>Mailing Address 6221 Ssassafras Lane</p> <p>City State Zip Code Toledo OH 43615</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4 FIELD REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 332.37</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.48061</p> <p>Amount of Each Receipt this Period 36.93</p>		
<p>Full Name (Last, First, Middle Initial) C. RACHEL C. MORROW</p> <p>Mailing Address 6221 Ssassafras Lane</p> <p>City State Zip Code Toledo OH 43615</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4 FIELD REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 382.37</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 20 / 2014 Transaction ID : SA11AI.49054</p> <p>Amount of Each Receipt this Period 50.00</p>		
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>160.83</p>		
<p>TOTAL This Period (last page this line number only)..... ▶</p>					

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

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 229 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. RACHEL C. MORROW</p> <p>Mailing Address 6221 Ssassafras Lane</p> <p>City Toledo State OH Zip Code 43615</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 419.30</p>			<p>Date of Receipt 05 / 27 / 2014 Transaction ID : SA11AI.48113 </p> <p>Amount of Each Receipt this Period 36.93 </p>	
<p>Full Name (Last, First, Middle Initial) B. RACHEL C. MORROW</p> <p>Mailing Address 6221 Ssassafras Lane</p> <p>City Toledo State OH Zip Code 43615</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 456.23</p>			<p>Date of Receipt 05 / 29 / 2014 Transaction ID : SA11AI.48166 </p> <p>Amount of Each Receipt this Period 36.93 </p>	
<p>Full Name (Last, First, Middle Initial) C. RODNEY D MOSBY</p> <p>Mailing Address 1107 Waterford Drive</p> <p>City District Heights State MD Zip Code 20747</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation ASSISTANT DIRECTOR, ACCOUNTING</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 325.30</p>			<p>Date of Receipt 05 / 15 / 2014 Transaction ID : SA11AI.47149 </p> <p>Amount of Each Receipt this Period 40.99 </p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>114.85</p>	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

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

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

FOR LINE NUMBER: PAGE 230 OF 403

(check only one)

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

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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. RODNEY D MOSBY

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

AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, ACCOUNTING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.29

Date of Receipt

05 / 27 / 2014

Transaction ID : SA11AI.47574

Amount of Each Receipt this Period

40.99

Full Name (Last, First, Middle Initial)

B. LATASHIA N. MOSELEY

Mailing Address 1879 Biscayne Bay Circle

City

Jacksonville

State

FL

Zip Code

32218

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.96

Date of Receipt

05 / 15 / 2014

Transaction ID : SA11AI.47150

Amount of Each Receipt this Period

28.14

Full Name (Last, First, Middle Initial)

C. LATASHIA N. MOSELEY

Mailing Address 1879 Biscayne Bay Circle

City

Jacksonville

State

FL

Zip Code

32218

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.10

Date of Receipt

05 / 27 / 2014

Transaction ID : SA11AI.47575

Amount of Each Receipt this Period

28.14

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

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

97.27

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

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

FOR LINE NUMBER:
(check only one)

PAGE 231 OF 403

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

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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. JULIE A. MOUNTS

Mailing Address P.O. Box 45355

City

Tacoma

State

WA

Zip Code

98448

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME WA CN 28/SOWA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.00

Date of Receipt

05 / 09 / 2014

Transaction ID : SA11AI.48293

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. JULIE A. MOUNTS

Mailing Address P.O. Box 45355

City

Tacoma

State

WA

Zip Code

98448

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME WA CN 28/SOWA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.00

Date of Receipt

05 / 23 / 2014

Transaction ID : SA11AI.48341

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. MICHELLE MULHERIN

Mailing Address 2462 Cleveland Avenue

City

Reading

State

PA

Zip Code

19609

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

389.50

Date of Receipt

05 / 12 / 2014

Transaction ID : SA11AI.47319

Amount of Each Receipt this Period

73.90

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

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

123.90

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 403

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 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. STEVEN C. MULLEN Full Name (Last, First, Middle Initial) Mailing Address 544 Clermont Drive City Harrisburg State PA Zip Code 17112 FEC ID number of contributing federal political committee. C Name of Employer AFSCME PA CN 13 Occupation TRADES LABORER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 599.20			Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> M M / D D / Y Y Y Y </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> 05 / 12 / 2014 </div> Transaction ID : SA11AI.47320 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 110.84 </div>
B. TRACY J MUNTZ Full Name (Last, First, Middle Initial) 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 AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00			Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> M M / D D / Y Y Y Y </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> 05 / 23 / 2014 </div> Transaction ID : SA11AI.48342 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 21.00 </div>
C. MARK MURPHY Full Name (Last, First, Middle Initial) Mailing Address 2133 Farrington Avenue City Alexandria State VA Zip Code 22303 FEC ID number of contributing federal political committee. C Name of Employer AFSCME INT'L Occupation LABOR ECONOMIST III Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 393.76			Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> M M / D D / Y Y Y Y </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> 05 / 15 / 2014 </div> Transaction ID : SA11AI.47151 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 49.22 </div>
SUBTOTAL of Receipts This Page (optional)..... ▶			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 181.06 </div>
TOTAL This Period (last page this line number only)..... ▶			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> </div>

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 233 OF 403

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

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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. MARK MURPHY

Mailing Address 2133 Farrington Avenue

City State Zip Code
Alexandria VA 22303

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

LABOR ECONOMIST III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

442.98

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.47576

Amount of Each Receipt this Period

49.22

Full Name (Last, First, Middle Initial)

B. STEVEN L. MYERS

Mailing Address 696 Hull Road

City State Zip Code
Mansfield OH 44907

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 12 / 2014

Transaction ID : SA11AI.48062

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. STEVEN L. MYERS

Mailing Address 696 Hull Road

City State Zip Code
Mansfield OH 44907

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.48114

Amount of Each Receipt this Period

40.00

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

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

129.22

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 234 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. STEVEN L. MYERS</p> <p>Mailing Address 696 Hull Road</p> <p>City Mansfield State OH Zip Code 44907</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4 Occupation REGIONAL DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 440.00</p>		<p>Date of Receipt 05 / 29 / 2014 Transaction ID : SA11AI.48167 </p> <p>Amount of Each Receipt this Period 40.00</p>
<p>Full Name (Last, First, Middle Initial) B. PHYLLIS S. NAIAD</p> <p>Mailing Address 13304 58th Drive NE</p> <p>City Marysville State WA Zip Code 98271</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME WA CN 28 Occupation COUNCIL REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 261.30</p>		<p>Date of Receipt 05 / 13 / 2014 Transaction ID : SA11AI.48343 </p> <p>Amount of Each Receipt this Period 52.26</p>
<p>Full Name (Last, First, Middle Initial) C. KENNY L. NANCE</p> <p>Mailing Address 583 Monticello Avenue</p> <p>City Riverside State OH Zip Code 45404</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4/MAD RIVER LS Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 201.12</p>		<p>Date of Receipt 05 / 20 / 2014 Transaction ID : SA11AI.48993 </p> <p>Amount of Each Receipt this Period 40.00</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		132.26
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

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

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 235 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. KENNY L. NANCE</p> <p>Mailing Address 583 Monticello Avenue</p> <p>City State Zip Code Riverside OH 45404</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4/MAD RIVER LS STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 215.01</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.48994</p> <p>Amount of Each Receipt this Period 13.89</p>
<p>Full Name (Last, First, Middle Initial) B. KENNY L. NANCE</p> <p>Mailing Address 583 Monticello Avenue</p> <p>City State Zip Code Riverside OH 45404</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4/MAD RIVER LS STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 228.90</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 29 / 2014 Transaction ID : SA11AI.48995</p> <p>Amount of Each Receipt this Period 13.89</p>
<p>Full Name (Last, First, Middle Initial) C. RACHEL E. NAUMAN</p> <p>Mailing Address 11021 Horseshoe Drive</p> <p>City State Zip Code Frederick MD 21701-3397</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L SPECIAL ASSISTANT TO SECRETARY TREAS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 450.90</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47152</p> <p>Amount of Each Receipt this Period 50.10</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		77.88
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

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

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 236 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. RACHEL E. NAUMAN</p> <p>Mailing Address 11021 Horseshoe Drive</p> <p>City State Zip Code Frederick MD 21701-3397</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L SPECIAL ASSISTANT TO SECRETARY TREASURER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 501.00</p>		<p>Date of Receipt MM / DD / YYYY 05 / 27 / 2014 Transaction ID : SA11AI.47577</p> <p>Amount of Each Receipt this Period 50.10</p>
<p>Full Name (Last, First, Middle Initial) B. BENJAMIN A. NEEDHAM</p> <p>Mailing Address P.O. Box 15206</p> <p>City State Zip Code Washington DC 20003</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L REGIONAL FIELD MANAGER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 600.12</p>		<p>Date of Receipt MM / DD / YYYY 05 / 15 / 2014 Transaction ID : SA11AI.47153</p> <p>Amount of Each Receipt this Period 66.68</p>
<p>Full Name (Last, First, Middle Initial) C. BENJAMIN A. NEEDHAM</p> <p>Mailing Address P.O. Box 15206</p> <p>City State Zip Code Washington DC 20003</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L REGIONAL FIELD MANAGER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 666.80</p>		<p>Date of Receipt MM / DD / YYYY 05 / 27 / 2014 Transaction ID : SA11AI.47578</p> <p>Amount of Each Receipt this Period 66.68</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		183.46
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 237 OF 403

(check only one)

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

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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. CHELSA A. NELSON

Mailing Address 300 Hardman Avenue South

City State Zip Code
 South St. Paul MN 55075

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MN CN 5/CN14

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.84

Date of Receipt

M M / D D / Y Y Y Y Y
 05 06 2014

Transaction ID : SA11AI.48607

Amount of Each Receipt this Period

49.28

Full Name (Last, First, Middle Initial)

B. CYNTHIA NELSON

Mailing Address 2648 Garfield Street, N.E.

City State Zip Code
 Minneapolis MN 55418

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MN CN 5/CN14

Occupation

BUSINESS REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.04

Date of Receipt

M M / D D / Y Y Y Y Y
 05 06 2014

Transaction ID : SA11AI.48609

Amount of Each Receipt this Period

73.12

Full Name (Last, First, Middle Initial)

C. RICHARD NELSON

Mailing Address 315 South Park

City State Zip Code
 Springfield MN 56087

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MN CN 65

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.40

Date of Receipt

M M / D D / Y Y Y Y Y
 05 01 2014

Transaction ID : SA11AI.48445

Amount of Each Receipt this Period

69.88

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

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

192.28

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

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

FOR LINE NUMBER:
(check only one)

PAGE 238 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. RICHARD NELSON</p> <p>Mailing Address 315 South Park</p> <p>City Springfield State MN Zip Code 56087</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME MN CN 65 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 439.28</p>			<p>Date of Receipt 05 / 30 / 2014 Transaction ID : SA11AI.48454 </p> <p>Amount of Each Receipt this Period 69.88 </p>	
<p>Full Name (Last, First, Middle Initial) B. JESSE NEWCOMER IV</p> <p>Mailing Address 2109 Circle Road</p> <p>City Carlisle State PA Zip Code 17013</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 496.90</p>			<p>Date of Receipt 05 / 12 / 2014 Transaction ID : SA11AI.47321 </p> <p>Amount of Each Receipt this Period 96.38 </p>	
<p>Full Name (Last, First, Middle Initial) C. CATHY L. NEWTON</p> <p>Mailing Address 221 E. Mulberry Street</p> <p>City Bryan State OH Zip Code 43506</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation ODJFS CUSTOMER SERVICES</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 270.00</p>			<p>Date of Receipt 05 / 02 / 2014 Transaction ID : SA11AI.48531 </p> <p>Amount of Each Receipt this Period 30.00 </p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>196.26</p>	
<p>TOTAL This Period (last page this line number only)..... ▶</p>			<p></p>	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

 FOR LINE NUMBER:
 (check only one)

PAGE 239 OF 403

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. CATHY L. NEWTON

Mailing Address 221 E. Mulberry Street

City	State	Zip Code
Bryan	OH	43506

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

ODJFS CUSTOMER SERVICES

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
05	/	16	/	2014

Transaction ID : SA11AI.48551

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. CATHY L. NEWTON

Mailing Address 221 E. Mulberry Street

City	State	Zip Code
Bryan	OH	43506

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

ODJFS CUSTOMER SERVICES

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
05	/	30	/	2014

Transaction ID : SA11AI.48571

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. JAMES B. NILAND

Mailing Address 2728 Pleasant Ave

City	State	Zip Code
Minneapolis	MN	55408

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME MN CN 5/CN14

Occupation

LEGISLATIVE/POLITICAL ACTION DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	06	/	2014

Transaction ID : SA11AI.48611

Amount of Each Receipt this Period

160.00

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

220.00

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 240 OF 403
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. JOSEPH NILSSON</p> <p>Mailing Address 3215 Eastland Circle SE</p> <p>City Olympia State WA Zip Code 98501</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME WA CN 28/STATE OF WA Occupation CLERICAL</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 210.00</p>			<p>Date of Receipt 05 / 23 / 2014 Transaction ID : SA11AI.48344 </p> <p>Amount of Each Receipt this Period 21.00</p>	
<p>Full Name (Last, First, Middle Initial) B. WILLIAM NOWEL</p> <p>Mailing Address 1382 Elbur Avenue</p> <p>City Lakewood State OH Zip Code 44107</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH CN 8 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 257.57</p>			<p>Date of Receipt 05 / 06 / 2014 Transaction ID : SA11AI.47825 </p> <p>Amount of Each Receipt this Period 52.39</p>	
<p>Full Name (Last, First, Middle Initial) C. GERARD O'NEILL</p> <p>Mailing Address 1179 Charles Street</p> <p>City N. Providence State RI Zip Code 02904</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME RI CN 94\ Occupation BUSINESS AGENT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 360.00</p>			<p>Date of Receipt 05 / 14 / 2014 Transaction ID : SA11AI.48427 </p> <p>Amount of Each Receipt this Period 180.00</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			253.39	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

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

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for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 241 OF 403
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. ANTHONY A OGUNDIRAN</p>			<p>Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>05 / 15 / 2014</div> </div> Transaction ID : SA11AI.47155 </p>		
<p>Mailing Address P.O. Box 11862</p>			<p>Amount of Each Receipt this Period <div> <div>27.39</div> </div> </p>		
<p>City Minneapolis</p>	<p>State MN</p>	<p>Zip Code 55411</p>			
<p>FEC ID number of contributing federal political committee. <div>C</div> </p>					
<p>Name of Employer AFSCME INT'L</p>		<p>Occupation ORGANIZER</p>			
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p>		<p>Aggregate Year-to-Date ▼ <div>246.51</div> </p>			
<p>Full Name (Last, First, Middle Initial) B. ANTHONY A OGUNDIRAN</p>			<p>Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>05 / 27 / 2014</div> </div> Transaction ID : SA11AI.47580 </p>		
<p>Mailing Address P.O. Box 11862</p>			<p>Amount of Each Receipt this Period <div> <div>27.39</div> </div> </p>		
<p>City Minneapolis</p>	<p>State MN</p>	<p>Zip Code 55411</p>			
<p>FEC ID number of contributing federal political committee. <div>C</div> </p>					
<p>Name of Employer AFSCME INT'L</p>		<p>Occupation ORGANIZER</p>			
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p>		<p>Aggregate Year-to-Date ▼ <div>273.90</div> </p>			
<p>Full Name (Last, First, Middle Initial) C. TRAVIS OHM</p>			<p>Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>05 / 12 / 2014</div> </div> Transaction ID : SA11AI.47322 </p>		
<p>Mailing Address 8 Highland Road</p>			<p>Amount of Each Receipt this Period <div> <div>99.66</div> </div> </p>		
<p>City Seven Valleys</p>	<p>State PA</p>	<p>Zip Code 17360</p>			
<p>FEC ID number of contributing federal political committee. <div>C</div> </p>					
<p>Name of Employer AFSCME PA CN 13</p>		<p>Occupation STAFF REPRESENTATIVE</p>			
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p>		<p>Aggregate Year-to-Date ▼ <div>498.30</div> </p>			
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<div>154.44</div>		
<p>TOTAL This Period (last page this line number only)..... ▶</p>			<div></div>		

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

 FOR LINE NUMBER:
 (check only one)

PAGE 242 OF 403

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial) A. RUSSELL K. OKATA		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 02 / 2014 Transaction ID : SA11AI.47985	
Mailing Address 1015 Wilder Avenue		Amount of Each Receipt this Period 100.00	
City Honolulu	State HI	Zip Code 96822	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME HI LOC 152	Occupation RETIREE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		
Full Name (Last, First, Middle Initial) B. HOLLY Y. OLSON		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47156	
Mailing Address 15443 Martins Hundred Drive		Amount of Each Receipt this Period 64.04	
City Centerville	State VA	Zip Code 20120	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation DIRECTOR, GENERAL SERVICES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 576.36		
Full Name (Last, First, Middle Initial) C. HOLLY Y. OLSON		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47581	
Mailing Address 15443 Martins Hundred Drive		Amount of Each Receipt this Period 64.04	
City Centerville	State VA	Zip Code 20120	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation DIRECTOR, GENERAL SERVICES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 640.40		
SUBTOTAL of Receipts This Page (optional)..... ▶		228.08	
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:
(check only one)

PAGE 243 OF 403

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

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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. SUSAN ORRIS

Mailing Address 536 Second Street

City

Steelton

State

PA

Zip Code

17113

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

05 / 12 / 2014

Transaction ID : SA11AI.47323

Amount of Each Receipt this Period

49.40

Full Name (Last, First, Middle Initial)

B. PETER S. OSHIRO

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

AFSCME HI LOC 152

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

05 / 02 / 2014

Transaction ID : SA11AI.47986

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

C. CURT A. OSTRANDER

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

AFSCME INT'L

Occupation

INT'L UNION BARGAINING REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

442.98

Date of Receipt

05 / 15 / 2014

Transaction ID : SA11AI.47157

Amount of Each Receipt this Period

49.22

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

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

140.62

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

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 244 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. CURT A. OSTRANDER</p> <p>Mailing Address 20 First Tavern Road</p> <p>City State Zip Code Jaffrey NH 03452-0000</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L INT'L UNION BARGAINING REPRESENTATIV</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 492.20</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47582</p> <p>Amount of Each Receipt this Period 49.22</p>	
<p>Full Name (Last, First, Middle Initial) B. GERALD OTTEN</p> <p>Mailing Address 2905 Evergreen Way</p> <p>City State Zip Code Ellicott City MD 21042</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L MANAGER, BENEFITS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 398.65</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47158</p> <p>Amount of Each Receipt this Period 44.93</p>	
<p>Full Name (Last, First, Middle Initial) C. GERALD OTTEN</p> <p>Mailing Address 2905 Evergreen Way</p> <p>City State Zip Code Ellicott City MD 21042</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L MANAGER, BENEFITS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 443.58</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47583</p> <p>Amount of Each Receipt this Period 44.93</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>139.08</p>	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

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

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for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 245 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. WILLIAM M. PADISAK Jr.</p> <p>Mailing Address 4886 Pine Trace Drive</p> <p>City State Zip Code Austintown OH 44515</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4 FIELD REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 353.74</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014</p> <p>Transaction ID : SA11AI.48063</p> <p>Amount of Each Receipt this Period 34.86</p>		
<p>Full Name (Last, First, Middle Initial) B. WILLIAM M. PADISAK Jr.</p> <p>Mailing Address 4886 Pine Trace Drive</p> <p>City State Zip Code Austintown OH 44515</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4 FIELD REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 403.74</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 20 / 2014</p> <p>Transaction ID : SA11AI.49055</p> <p>Amount of Each Receipt this Period 50.00</p>		
<p>Full Name (Last, First, Middle Initial) C. WILLIAM M. PADISAK Jr.</p> <p>Mailing Address 4886 Pine Trace Drive</p> <p>City State Zip Code Austintown OH 44515</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4 FIELD REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 438.60</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014</p> <p>Transaction ID : SA11AI.48115</p> <p>Amount of Each Receipt this Period 34.86</p>		
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			119.72		
<p>TOTAL This Period (last page this line number only)..... ▶</p>					

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 246 OF 403
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. WILLIAM M. PADISAK Jr.</p> <p>Mailing Address 4886 Pine Trace Drive</p> <p>City State Zip Code Austintown OH 44515</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4 FIELD REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 473.46</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 29 / 2014 Transaction ID : SA11AI.48168 </p> <p>Amount of Each Receipt this Period 34.86</p>	
<p>Full Name (Last, First, Middle Initial) B. WILLIAM R. PALMQUIST</p> <p>Mailing Address 733 37th Avenue</p> <p>City State Zip Code Seattle WA 98122</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME WA CN 28 STRATEGIC COORDINATOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 275.40</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 13 / 2014 Transaction ID : SA11AI.48345 </p> <p>Amount of Each Receipt this Period 55.08</p>	
<p>Full Name (Last, First, Middle Initial) C. JAMES PARRETT</p> <p>Mailing Address 517 Edgewood Drive</p> <p>City State Zip Code Burlington WI 53105</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME WI CN 24 FIELD REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 294.58</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 02 / 2014 Transaction ID : SA11AI.48408 </p> <p>Amount of Each Receipt this Period 53.56</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			143.50	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

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

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 247 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. SHERRY A. PATTERSON</p> <p>Mailing Address 404 W. Walnut Street</p> <p>City State Zip Code Mt Vernon OH 43050</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4/MT VERNON SECRETARY</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 245.94</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.48996</p> <p>Amount of Each Receipt this Period 40.00</p>
<p>Full Name (Last, First, Middle Initial) B. SHERRY A. PATTERSON</p> <p>Mailing Address 404 W. Walnut Street</p> <p>City State Zip Code Mt Vernon OH 43050</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4/MT VERNON SECRETARY</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 275.36</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.48997</p> <p>Amount of Each Receipt this Period 29.42</p>
<p>Full Name (Last, First, Middle Initial) C. SHERRY A. PATTERSON</p> <p>Mailing Address 404 W. Walnut Street</p> <p>City State Zip Code Mt Vernon OH 43050</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4/MT VERNON SECRETARY</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 304.78</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.48998</p> <p>Amount of Each Receipt this Period 29.42</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		98.84
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

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

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 248 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 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. SHERRY A. PATTERSON Full Name (Last, First, Middle Initial) Mailing Address 404 W. Walnut Street City State Zip Code Mt Vernon OH 43050 FEC ID number of contributing federal political committee. C Name of Employer Occupation AFSCME OH LOC 4/MT VERNON SECRETARY Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 334.20			Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.48999 Amount of Each Receipt this Period 29.42		
B. BARRY PEARCE Full Name (Last, First, Middle Initial) Mailing Address 130 N. Wilson Street City State Zip Code Bellefonte PA 16823 FEC ID number of contributing federal political committee. C Name of Employer Occupation AFSCME PA CN 13 STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 369.50			Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.47325 Amount of Each Receipt this Period 73.90		
C. WILLIE L. PELOTE Full Name (Last, First, Middle Initial) Mailing Address 351 Ross Way City State Zip Code Sacramento CA 95864 FEC ID number of contributing federal political committee. C Name of Employer Occupation AFSCME INT'L ASSISTANT DIRECTOR, POLITICAL ACTION Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 483.39			Date of Receipt M M / D D / Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47159 Amount of Each Receipt this Period 53.71		
SUBTOTAL of Receipts This Page (optional)..... ▶			157.03		
TOTAL This Period (last page this line number only)..... ▶					

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

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 249 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. WILLIE L. PELOTE</p> <p>Mailing Address 351 Ross Way</p> <p>City State Zip Code Sacramento CA 95864</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L ASSISTANT DIRECTOR, POLITICAL ACTION</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 537.10</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47584</p> <p>Amount of Each Receipt this Period 53.71</p>	
<p>Full Name (Last, First, Middle Initial) B. JOANNE M. PELS</p> <p>Mailing Address 6987 County 38 NW</p> <p>City State Zip Code Walker MN 56484</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MN CN 5/CN14 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 423.95</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 06 / 2014 Transaction ID : SA11AI.48612</p> <p>Amount of Each Receipt this Period 83.38</p>	
<p>Full Name (Last, First, Middle Initial) C. PAMELA PERILLO</p> <p>Mailing Address 9270 Billingsley Road</p> <p>City State Zip Code White Plains MD 20695</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L ADMINISTRATIVE ASSISTANT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 326.43</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47160</p> <p>Amount of Each Receipt this Period 36.27</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>173.36</p>	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

 FOR LINE NUMBER:
 (check only one)

PAGE 250 OF 403

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. PAMELA PERILLO

Mailing Address 9270 Billingsley Road

City

White Plains

State

MD

Zip Code

20695

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	7			2	0	1	4		

Transaction ID : SA11AI.47585

Amount of Each Receipt this Period

36.27

Full Name (Last, First, Middle Initial)

B. STEPHEN F. PERKINSMailing Address 6901 Los Volcano Road
#0103

City

Albuquerque

State

NM

Zip Code

87121

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME NM CN 18/BERNALILLO

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

235.98

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	6			2	0	1	4		

Transaction ID : SA11AI.48429

Amount of Each Receipt this Period

26.22

Full Name (Last, First, Middle Initial)

C. RANDOLPH P. PERREIRA

Mailing Address 1044 Mokuhanu Street

City

Honolulu

State

HI

Zip Code

96825

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME HI LOC 152

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

556.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	2			2	0	1	4		

Transaction ID : SA11AI.47987

Amount of Each Receipt this Period

100.00

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

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

162.49

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

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 251 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. RANDOLPH P. PERREIRA</p> <p>Mailing Address 1044 Mokuhano Street</p> <p>City Honolulu State HI Zip Code 96825</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME HI LOC 152 Occupation EXECUTIVE DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 570.00</p>			<p>Date of Receipt 05 / 27 / 2014 Transaction ID : SA11AI.48388 </p> <p>Amount of Each Receipt this Period 14.00 </p>	
<p>Full Name (Last, First, Middle Initial) B. ELIZABETH PERROW</p> <p>Mailing Address 958 N. Harrison Street</p> <p>City Arlington State VA Zip Code 22205</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation ASSISTANT TO JUD. PANEL CHAIRPERSON</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 422.28</p>			<p>Date of Receipt 05 / 15 / 2014 Transaction ID : SA11AI.47161 </p> <p>Amount of Each Receipt this Period 46.92 </p>	
<p>Full Name (Last, First, Middle Initial) C. ELIZABETH PERROW</p> <p>Mailing Address 958 N. Harrison Street</p> <p>City Arlington State VA Zip Code 22205</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation ASSISTANT TO JUD. PANEL CHAIRPERSON</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 469.20</p>			<p>Date of Receipt 05 / 27 / 2014 Transaction ID : SA11AI.47586 </p> <p>Amount of Each Receipt this Period 46.92 </p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			107.84	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

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

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

FOR LINE NUMBER:
(check only one)

PAGE 252 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. KOLBY PETERSON</p> <p>Mailing Address 9417 Braymore Circle</p> <p>City State Zip Code Fairfax Station VA 22039</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L ASSISTANT DIRECTOR, POLLING</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 445.77</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47163</p> <p>Amount of Each Receipt this Period 49.53</p>		
<p>Full Name (Last, First, Middle Initial) B. KOLBY PETERSON</p> <p>Mailing Address 9417 Braymore Circle</p> <p>City State Zip Code Fairfax Station VA 22039</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L ASSISTANT DIRECTOR, POLLING</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 495.30</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47588</p> <p>Amount of Each Receipt this Period 49.53</p>		
<p>Full Name (Last, First, Middle Initial) C. RONNIE D. PETERSON</p> <p>Mailing Address 1146 Rue Willette Blvd.</p> <p>City State Zip Code Ypsilanti MI 48196</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L POLITICAL ACTION REPRESENTATIVE III</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1328.94</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47164</p> <p>Amount of Each Receipt this Period 147.66</p>		
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>246.72</p>		
<p>TOTAL This Period (last page this line number only)..... ▶</p>					

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

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

FOR LINE NUMBER:
(check only one)

PAGE 253 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. RONNIE D. PETERSON</p> <p>Mailing Address 1146 Rue Willette Blvd.</p> <p>City Ypsilanti State MI Zip Code 48196</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation POLITICAL ACTION REPRESENTATIVE III</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 1476.60</p>			<p>Date of Receipt 05 / 27 / 2014 Transaction ID : SA11AI.47589 </p> <p>Amount of Each Receipt this Period 147.66</p>	
<p>Full Name (Last, First, Middle Initial) B. RICHARD L. PETTIT</p> <p>Mailing Address 1957 Coppermine Road</p> <p>City Buchanan State GA Zip Code 30113</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation ASSISTANT TO REGIONAL DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 662.25</p>			<p>Date of Receipt 05 / 15 / 2014 Transaction ID : SA11AI.47165 </p> <p>Amount of Each Receipt this Period 68.51</p>	
<p>Full Name (Last, First, Middle Initial) C. RICHARD L. PETTIT</p> <p>Mailing Address 1957 Coppermine Road</p> <p>City Buchanan State GA Zip Code 30113</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation ASSISTANT TO REGIONAL DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 730.76</p>			<p>Date of Receipt 05 / 27 / 2014 Transaction ID : SA11AI.47590 </p> <p>Amount of Each Receipt this Period 68.51</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			284.68	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

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

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

FOR LINE NUMBER:
(check only one)

PAGE 254 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. BRYAN T. PHENICIE</p> <p>Mailing Address 684 Niles Road</p> <p>City State Zip Code Franklin PA 16323</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME PA CN 13/STATE OF PA STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 220.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 30 / 2014 Transaction ID : SA11AI.48799</p> <p>Amount of Each Receipt this Period 40.00</p>
<p>Full Name (Last, First, Middle Initial) B. CATHERINE PHILLIPS</p> <p>Mailing Address 15707 Manning Street</p> <p>City State Zip Code Detroit MI 48205</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MI CN 25 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 232.96</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 08 / 2014 Transaction ID : SA11AI.48207</p> <p>Amount of Each Receipt this Period 29.12</p>
<p>Full Name (Last, First, Middle Initial) C. CATHERINE PHILLIPS</p> <p>Mailing Address 15707 Manning Street</p> <p>City State Zip Code Detroit MI 48205</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MI CN 25 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 262.08</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 21 / 2014 Transaction ID : SA11AI.48230</p> <p>Amount of Each Receipt this Period 29.12</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		98.24
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

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

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

FOR LINE NUMBER:
(check only one)

PAGE 255 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 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. MICHELLE R. PHILLIPS Full Name (Last, First, Middle Initial) Mailing Address 323 N. Warren Avenue City Columbus State OH Zip Code 43204 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH LOC 4/SOUTH-WESTERN Occupation CUSTODIAN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 312.50			Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.49056 Amount of Each Receipt this Period 62.50
B. STEVAN P. PICKARD Full Name (Last, First, Middle Initial) Mailing Address 3325 Capricio Street, NE City Canton State OH Zip Code 44721-2702 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH CN 8 Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 320.50			Date of Receipt M M / D D / Y Y Y Y Y 05 / 06 / 2014 Transaction ID : SA11AI.47827 Amount of Each Receipt this Period 64.40
C. CLIFFORD T. POEHLER Full Name (Last, First, Middle Initial) Mailing Address 565 Glendale Street City Minneapolis State MN Zip Code 55104 FEC ID number of contributing federal political committee. C Name of Employer AFSCME MN CN 5/HENNEPIN COUNTY Occupation LEGAL ASSISTANT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 298.20			Date of Receipt M M / D D / Y Y Y Y Y 05 / 02 / 2014 Transaction ID : SA11AI.47885 Amount of Each Receipt this Period 68.30
SUBTOTAL of Receipts This Page (optional)..... ▶			195.20
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 256 OF 403

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. CLIFFORD T. POEHLER</p> <p>Mailing Address 565 Glendale Street</p> <p>City State Zip Code Minneapolis MN 55104</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MN CN 5/HENNEPIN COUNTY LEGAL ASSISTANT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 366.50</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 29 / 2014 Transaction ID : SA11AI.47886</p> <p>Amount of Each Receipt this Period 68.30</p>
<p>Full Name (Last, First, Middle Initial) B. CHRISTOPHER D. POLICANO</p> <p>Mailing Address 2480 16th Street NW Apt. 314</p> <p>City State Zip Code Washington DC 20009</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L DIRECTOR, COMMUNICATIONS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 801.76</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47166</p> <p>Amount of Each Receipt this Period 74.64</p>
<p>Full Name (Last, First, Middle Initial) C. CHRISTOPHER D. POLICANO</p> <p>Mailing Address 2480 16th Street NW Apt. 314</p> <p>City State Zip Code Washington DC 20009</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L DIRECTOR, COMMUNICATIONS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 876.40</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47591</p> <p>Amount of Each Receipt this Period 74.64</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		217.58
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

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

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

FOR LINE NUMBER: PAGE 257 OF 403

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. NICOLE R. POLLARD</p> <p>Mailing Address 9404 Nicklaus Lane</p> <p>City State Zip Code Laurel MD 20708</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L ASSOCIATE GENERAL COUNSEL II</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 557.10</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47167</p> <p>Amount of Each Receipt this Period 61.90</p>	
<p>Full Name (Last, First, Middle Initial) B. NICOLE R. POLLARD</p> <p>Mailing Address 9404 Nicklaus Lane</p> <p>City State Zip Code Laurel MD 20708</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L ASSOCIATE GENERAL COUNSEL II</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 619.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47592</p> <p>Amount of Each Receipt this Period 61.90</p>	
<p>Full Name (Last, First, Middle Initial) C. MARY L. PORTER</p> <p>Mailing Address 9800 Bellefontaine Road</p> <p>City State Zip Code St. Louis MO 63137</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L INTERNATIONAL UNION REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 210.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47168</p> <p>Amount of Each Receipt this Period 35.00</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			158.80	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

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Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 258 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. MARY L. PORTER</p>			<p>Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>05 / 27 / 2014</div> </div> </p>		
<p>Mailing Address 9800 Bellefontaine Road</p>			<p>Transaction ID : SA11AI.47593</p>		
<p>City State Zip Code St. Louis MO 63137</p>		<p>Amount of Each Receipt this Period <div> <div>Y Y Y Y Y</div> <div>35.00</div> </div> </p>			
<p>FEC ID number of contributing federal political committee. <div> <div>C</div> <div>Y Y Y Y Y</div> </div> </p>					
<p>Name of Employer AFSCME INT'L</p>		<p>Occupation INTERNATIONAL UNION REPRESENTATIVE</p>			
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Aggregate Year-to-Date ▼ <div> <div>Y Y Y Y Y</div> <div>245.00</div> </div> </p>			
<p>Full Name (Last, First, Middle Initial) B. EDWARD POTTS</p>			<p>Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>05 / 12 / 2014</div> </div> </p>		
<p>Mailing Address 240 Bentz Mill Road</p>			<p>Transaction ID : SA11AI.47327</p>		
<p>City State Zip Code Wellsville PA 17365</p>		<p>Amount of Each Receipt this Period <div> <div>Y Y Y Y Y</div> <div>73.90</div> </div> </p>			
<p>FEC ID number of contributing federal political committee. <div> <div>C</div> <div>Y Y Y Y Y</div> </div> </p>					
<p>Name of Employer AFSCME PA CN 13</p>		<p>Occupation CLERK</p>			
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Aggregate Year-to-Date ▼ <div> <div>Y Y Y Y Y</div> <div>369.50</div> </div> </p>			
<p>Full Name (Last, First, Middle Initial) C. GREGORY A. POWELL</p>			<p>Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>05 / 15 / 2014</div> </div> </p>		
<p>Mailing Address 1300 Abbey Road</p>			<p>Transaction ID : SA11AI.47169</p>		
<p>City State Zip Code Round Rock TX 78681</p>		<p>Amount of Each Receipt this Period <div> <div>Y Y Y Y Y</div> <div>47.33</div> </div> </p>			
<p>FEC ID number of contributing federal political committee. <div> <div>C</div> <div>Y Y Y Y Y</div> </div> </p>					
<p>Name of Employer AFSCME INT'L</p>		<p>Occupation AREA FIELD SERVICES DIRECTOR</p>			
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Aggregate Year-to-Date ▼ <div> <div>Y Y Y Y Y</div> <div>331.31</div> </div> </p>			
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<div> <div>Y Y Y Y Y</div> <div>156.23</div> </div>		
<p>TOTAL This Period (last page this line number only)..... ▶</p>			<div> <div>Y Y Y Y Y</div> <div></div> </div>		

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

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

FOR LINE NUMBER:
(check only one)

PAGE 259 OF 403

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

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. GREGORY A. POWELL</p> <p>Mailing Address 1300 Abbey Road</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Round Rock</td> <td style="width: 33%;">State TX</td> <td style="width: 33%;">Zip Code 78681</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME INT'L</td> <td style="width: 66%;">Occupation AREA FIELD SERVICES DIRECTOR</td> </tr> </table> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p>			City Round Rock	State TX	Zip Code 78681	Name of Employer AFSCME INT'L	Occupation AREA FIELD SERVICES DIRECTOR	<p>Date of Receipt</p> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> M M / D D / Y Y Y Y Y Y </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> 05 / 27 / 2014 </div> <p>Transaction ID : SA11AI.47594</p> <p>Amount of Each Receipt this Period</p> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 47.33 </div>
City Round Rock	State TX	Zip Code 78681						
Name of Employer AFSCME INT'L	Occupation AREA FIELD SERVICES DIRECTOR							
<p>Full Name (Last, First, Middle Initial) B. REBECCA POWELL</p> <p>Mailing Address 1212 Jefferson Street SE</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Olympia</td> <td style="width: 33%;">State WA</td> <td style="width: 33%;">Zip Code 98501</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME WA CN 28/STATE OF WA</td> <td style="width: 66%;">Occupation STAFF REPRESENTATIVE</td> </tr> </table> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p>			City Olympia	State WA	Zip Code 98501	Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE	<p>Date of Receipt</p> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> M M / D D / Y Y Y Y Y Y </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> 05 / 09 / 2014 </div> <p>Transaction ID : SA11AI.48296</p> <p>Amount of Each Receipt this Period</p> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 30.00 </div>
City Olympia	State WA	Zip Code 98501						
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE							
<p>Full Name (Last, First, Middle Initial) C. REBECCA POWELL</p> <p>Mailing Address 1212 Jefferson Street SE</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Olympia</td> <td style="width: 33%;">State WA</td> <td style="width: 33%;">Zip Code 98501</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME WA CN 28/STATE OF WA</td> <td style="width: 66%;">Occupation STAFF REPRESENTATIVE</td> </tr> </table> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p>			City Olympia	State WA	Zip Code 98501	Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE	<p>Date of Receipt</p> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> M M / D D / Y Y Y Y Y Y </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> 05 / 23 / 2014 </div> <p>Transaction ID : SA11AI.48346</p> <p>Amount of Each Receipt this Period</p> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 30.00 </div>
City Olympia	State WA	Zip Code 98501						
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE							
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 107.33 </div>					
<p>TOTAL This Period (last page this line number only)..... ▶</p>			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> </div>					

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

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

FOR LINE NUMBER:
(check only one)

PAGE 260 OF 403

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

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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. STEVE PREBLE

Mailing Address P.O. Box 204

City

Colerain

State

MN

Zip Code

55722

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MN CN 65

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

555.80

Date of Receipt

05 / 01 / 2014

Transaction ID : SA11AI.48446

Amount of Each Receipt this Period

95.96

Full Name (Last, First, Middle Initial)

B. STEVE PREBLE

Mailing Address P.O. Box 204

City

Colerain

State

MN

Zip Code

55722

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MN CN 65

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

569.80

Date of Receipt

05 / 27 / 2014

Transaction ID : SA11AI.48389

Amount of Each Receipt this Period

14.00

Full Name (Last, First, Middle Initial)

C. STEVE PREBLE

Mailing Address P.O. Box 204

City

Colerain

State

MN

Zip Code

55722

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MN CN 65

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

665.76

Date of Receipt

05 / 30 / 2014

Transaction ID : SA11AI.48455

Amount of Each Receipt this Period

95.96

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

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

205.92

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 261 OF 403

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

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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. HELEN PRESSLEY

Mailing Address P.O. Box 7606

City
Olympia

State
WA

Zip Code
98507

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

05 / 23 / 2014

Transaction ID : SA11AI.48347

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

B. DELBERT G. PRICE

Mailing Address 885 Haverhill Drive

City
Hamilton

State
OH

Zip Code
45013

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

INTERNATIONAL UNION REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

409.32

Date of Receipt

05 / 15 / 2014

Transaction ID : SA11AI.47170

Amount of Each Receipt this Period

45.48

Full Name (Last, First, Middle Initial)

C. DELBERT G. PRICE

Mailing Address 885 Haverhill Drive

City
Hamilton

State
OH

Zip Code
45013

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

INTERNATIONAL UNION REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

454.80

Date of Receipt

05 / 27 / 2014

Transaction ID : SA11AI.47595

Amount of Each Receipt this Period

45.48

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

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

111.96

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

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

FOR LINE NUMBER:
(check only one)

PAGE 262 OF 403

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

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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. GAIL L. PRICE

Mailing Address 1613 Wayland Avenue

City
Sacramento

State Zip Code
CA 95825

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME CA LOC 3299/UNIV OF CA

Occupation
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 21 / 2014

Transaction ID : SA11AI.48466

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. ROBYN PRICE

Mailing Address 1034 N. Washington Avenue

City
Lansing

State Zip Code
MI 48906

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MI CN 25

Occupation
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 21 / 2014

Transaction ID : SA11AI.48231

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. ERWIN D. PRIM

Mailing Address 729 1/2 Fourth Street

City
Marietta

State Zip Code
OH 45750

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 4/MARIETTA CSD

Occupation
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
05 / 29 / 2014

Transaction ID : SA11AI.49002

Amount of Each Receipt this Period

20.84

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

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

145.84

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

 FOR LINE NUMBER: PAGE 263 OF 403
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. MARCIA PROVOST

Mailing Address 555 Third Street SE

City	State	Zip Code
Milaca	MN	56353

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME MN CN 5/STATE OF MN

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	28	/	2014

Transaction ID : SA11AI.47876

Amount of Each Receipt this Period

48.00

Full Name (Last, First, Middle Initial)

B. DEVORRUS PRYORMailing Address 514 Shatto Place
3rd Floor

City	State	Zip Code
Los Angeles	CA	90020

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME CA CN 36/LOCAL 685

Occupation

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
05	/	14	/	2014

Transaction ID : SA11AI.47897

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. LLOYD L. RAINS

Mailing Address 15829 Narraganset Oval

City	State	Zip Code
Middleburg Hts	OH	44130

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	12	/	2014

Transaction ID : SA11AI.48064

Amount of Each Receipt this Period

40.00

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

188.00

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:
(check only one)

PAGE 264 OF 403

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

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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. LLOYD L. RAINS

Mailing Address 15829 Narraganset Oval

City State Zip Code
 Middleburg Hts OH 44130

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

05 / 20 / 2014

Transaction ID : SA11AI.49057

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. LLOYD L. RAINS

Mailing Address 15829 Narraganset Oval

City State Zip Code
 Middleburg Hts OH 44130

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

05 / 27 / 2014

Transaction ID : SA11AI.48116

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. LLOYD L. RAINS

Mailing Address 15829 Narraganset Oval

City State Zip Code
 Middleburg Hts OH 44130

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

05 / 29 / 2014

Transaction ID : SA11AI.48169

Amount of Each Receipt this Period

40.00

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

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

120.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

 FOR LINE NUMBER:
 (check only one)

PAGE 265 OF 403

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial) A. EDWARD J RAMTHUN			Date of Receipt M M / D D / Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47171	
Mailing Address 810 Fleetwood Drive			Amount of Each Receipt this Period 49.22	
City Indianapolis	State IN	Zip Code 46228		
FEC ID number of contributing federal political committee. C				
Name of Employer AFSCME INT'L		Occupation ORGANIZING RESEARCH SPECIALIST III		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 344.54		
Full Name (Last, First, Middle Initial) B. EDWARD J RAMTHUN			Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47596	
Mailing Address 810 Fleetwood Drive			Amount of Each Receipt this Period 49.22	
City Indianapolis	State IN	Zip Code 46228		
FEC ID number of contributing federal political committee. C				
Name of Employer AFSCME INT'L		Occupation ORGANIZING RESEARCH SPECIALIST III		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 393.76		
Full Name (Last, First, Middle Initial) C. SUSIE ANN RATHKE			Date of Receipt M M / D D / Y Y Y Y Y 05 / 09 / 2014 Transaction ID : SA11AI.48298	
Mailing Address 1212 Jefferson Street SE			Amount of Each Receipt this Period 25.00	
City Olympia	State WA	Zip Code 98501		
FEC ID number of contributing federal political committee. C				
Name of Employer AFSCME WA CN 28/STATE OF WA		Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00		
SUBTOTAL of Receipts This Page (optional)..... ▶			123.44	
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:
(check only one)

PAGE 266 OF 403

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

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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. SUSIE ANN RATHKE

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
AFSCME WA CN 28/STATE OF WA

Occupation
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 23 / 2014

Transaction ID : SA11AI.48348

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. ZOLLIE RAYNER

Mailing Address P.O. Box 51

City Albion State PA Zip Code 16401

FEC ID number of contributing federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.50

Date of Receipt

05 / 12 / 2014

Transaction ID : SA11AI.47328

Amount of Each Receipt this Period

73.90

Full Name (Last, First, Middle Initial)

C. MICHAEL J. REICHERT

Mailing Address 1724 Kalorama Rd. NW

City Washington State DC Zip Code 20009

FEC ID number of contributing federal political committee.

C

Name of Employer
AFSCME DC CN 20

Occupation
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

05 / 06 / 2014

Transaction ID : SA11AI.48459

Amount of Each Receipt this Period

25.00

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

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

123.90

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 267 OF 403

(check only one)

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

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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. MICHAEL J. REICHERT

Mailing Address 1724 Kalorama Rd. NW

City

Washington

State

DC

Zip Code

20009

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME DC CN 20

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

 M M / D D / Y Y Y Y Y
 05 / 07 / 2014

Transaction ID : SA11AI.48460

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. MICHAEL J. REICHERT

Mailing Address 1724 Kalorama Rd. NW

City

Washington

State

DC

Zip Code

20009

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME DC CN 20

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

 M M / D D / Y Y Y Y Y
 05 / 21 / 2014

Transaction ID : SA11AI.48461

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

C. LAURA REYES

Mailing Address 3440 Joan Court

City

Falls Church

State

VA

Zip Code

20042

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

SECRETARY TREASURER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

962.01

Date of Receipt

 M M / D D / Y Y Y Y Y
 05 / 15 / 2014

Transaction ID : SA11AI.47173

Amount of Each Receipt this Period

106.89

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

216.89

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

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

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 268 OF 403

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

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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. LAURA REYES

Mailing Address 3440 Joan Court

City State Zip Code
 Falls Church VA 20042

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

SECRETARY TREASURER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1068.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 27 / 2014

Transaction ID : SA11AI.47598

Amount of Each Receipt this Period

106.89

Full Name (Last, First, Middle Initial)

B. HARRY RHODES

Mailing Address 4031 Executive Park Drive

City State Zip Code
 Harrisburg PA 17111

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 12 / 2014

Transaction ID : SA11AI.47329

Amount of Each Receipt this Period

64.16

Full Name (Last, First, Middle Initial)

C. LISA E. RICE

Mailing Address 1456 Greenmont Court

City State Zip Code
 Reston VA 20190

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

PROJECTS COORDINATOR, ORGNZG &FLD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.29

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 15 / 2014

Transaction ID : SA11AI.47174

Amount of Each Receipt this Period

41.21

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

212.26

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:
(check only one)

PAGE 269 OF 403

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

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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. LISA E. RICE

Mailing Address 1456 Greenmont Court

City State Zip Code
Reston VA 20190

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

PROJECTS COORDINATOR, ORGNZG & FLD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.50

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.47599

Amount of Each Receipt this Period

41.21

Full Name (Last, First, Middle Initial)

B. SHAWN E. RICHARDSON

Mailing Address 6688 Markwood Street

City State Zip Code
Worthington OH 43085

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

TRANSPORTATION TECHN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 02 / 2014

Transaction ID : SA11AI.48532

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. SHAWN E. RICHARDSON

Mailing Address 6688 Markwood Street

City State Zip Code
Worthington OH 43085

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

TRANSPORTATION TECHN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 16 / 2014

Transaction ID : SA11AI.48552

Amount of Each Receipt this Period

40.00

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

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

121.21

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 270 OF 403

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 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. SHAWN E. RICHARDSON Full Name (Last, First, Middle Initial) Mailing Address 6688 Markwood Street City State Zip Code Worthington OH 43085 FEC ID number of contributing federal political committee. C Name of Employer Occupation AFSCME OH LOC 11/STATE OF OH TRANSPORTATION TECHN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div style="border: 1px solid black; width: 150px; text-align: right; padding: 2px;">440.00</div>			Date of Receipt <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 05 / 30 / 2014 </div> Transaction ID : SA11AI.48572 Amount of Each Receipt this Period <div style="border: 1px solid black; width: 150px; text-align: right; padding: 2px;">40.00</div>	
B. MICHELLE RIDER Full Name (Last, First, Middle Initial) Mailing Address 4031 Executive Park Drive City State Zip Code Harrisburg PA 17111 FEC ID number of contributing federal political committee. C Name of Employer Occupation AFSCME PA CN 13 STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div style="border: 1px solid black; width: 150px; text-align: right; padding: 2px;">706.60</div>			Date of Receipt <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 05 / 12 / 2014 </div> Transaction ID : SA11AI.47330 Amount of Each Receipt this Period <div style="border: 1px solid black; width: 150px; text-align: right; padding: 2px;">128.32</div>	
C. JOY L. RING Full Name (Last, First, Middle Initial) Mailing Address 1334 Haloa Drive City State Zip Code Honolulu HI 96818 FEC ID number of contributing federal political committee. C Name of Employer Occupation AFSCME HI LOC 152 STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div style="border: 1px solid black; width: 150px; text-align: right; padding: 2px;">300.00</div>			Date of Receipt <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 05 / 02 / 2014 </div> Transaction ID : SA11AI.47989 Amount of Each Receipt this Period <div style="border: 1px solid black; width: 150px; text-align: right; padding: 2px;">60.00</div>	
SUBTOTAL of Receipts This Page (optional)..... ▶			<div style="border: 1px solid black; width: 150px; text-align: right; padding: 2px;">228.32</div>	
TOTAL This Period (last page this line number only)..... ▶			<div style="border: 1px solid black; width: 150px; text-align: right; padding: 2px;"></div>	

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 271 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>Full Name (Last, First, Middle Initial) A. THOMAS J. RITCHIE Sr.</p> <p>Mailing Address 1644 Spaulding Road</p> <p>City State Zip Code Dayton OH 45432</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH CN 8 REGIONAL DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 503.24</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 06 / 2014 Transaction ID : SA11AI.47830</p> <p>Amount of Each Receipt this Period 101.24</p>	
<p>Full Name (Last, First, Middle Initial) B. JUDITH E. RIVLIN</p> <p>Mailing Address 5203 Westport Road</p> <p>City State Zip Code Chevy Chase MD 20815</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L DEPUTY GENERAL COUNSEL</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 401.94</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47175</p> <p>Amount of Each Receipt this Period 66.99</p>	
<p>Full Name (Last, First, Middle Initial) C. JUDITH E. RIVLIN</p> <p>Mailing Address 5203 Westport Road</p> <p>City State Zip Code Chevy Chase MD 20815</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L DEPUTY GENERAL COUNSEL</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 468.93</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47600</p> <p>Amount of Each Receipt this Period 66.99</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>235.22</p>	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 272 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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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. DALE C. ROBERTS

Mailing Address P.O. Box 338

City

Medical Lake

State

WA

Zip Code

99022

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME WA CN 28

Occupation

COUNCIL 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
05 / 13 / 2014

Transaction ID : SA11AI.48349

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. STEPHEN M. ROBERTS

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

AFSCME OH CN 8

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.32

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 06 / 2014

Transaction ID : SA11AI.47831

Amount of Each Receipt this Period

20.84

Full Name (Last, First, Middle Initial)

C. JESSICA R. ROBINSON

Mailing Address 7901 Chicago Avenue

City

Silver Spring

State

MD

Zip Code

20910

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOCIATE GENERAL COUNSEL II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1061.10

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.47176

Amount of Each Receipt this Period

117.90

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

188.74

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 273 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>Full Name (Last, First, Middle Initial) A. JESSICA R. ROBINSON</p> <p>Mailing Address 7901 Chicago Avenue</p> <p>City State Zip Code Silver Spring MD 20910</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L ASSOCIATE GENERAL COUNSEL II</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 1179.00 </p>			<p>Date of Receipt 05 / 27 / 2014 </p> <p>Transaction ID : SA11AI.47601</p> <p>Amount of Each Receipt this Period 117.90 </p>	
<p>Full Name (Last, First, Middle Initial) B. CHRISTINA D. RODMAN</p> <p>Mailing Address 1011 Piedmont Road</p> <p>City State Zip Code Columbus OH 43224</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 11/STATE OF OH UTILITIES TECHNICIAN</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 210.00 </p>			<p>Date of Receipt 05 / 16 / 2014 </p> <p>Transaction ID : SA11AI.48553</p> <p>Amount of Each Receipt this Period 21.00 </p>	
<p>Full Name (Last, First, Middle Initial) C. CHRISTINA D. RODMAN</p> <p>Mailing Address 1011 Piedmont Road</p> <p>City State Zip Code Columbus OH 43224</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 11/STATE OF OH UTILITIES TECHNICIAN</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 231.00 </p>			<p>Date of Receipt 05 / 30 / 2014 </p> <p>Transaction ID : SA11AI.48573</p> <p>Amount of Each Receipt this Period 21.00 </p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			159.90	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 274 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>Full Name (Last, First, Middle Initial) A. LAWRENCE ROEHRIG</p> <p>Mailing Address 13084 Lia Court</p> <p>City State Zip Code London MI 48451</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MI CN 25 EXECUTIVE DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1135.04</p>			<p>Date of Receipt 05 / 08 / 2014</p> <p>Transaction ID : SA11AI.48209</p> <p>Amount of Each Receipt this Period 106.88</p>	
<p>Full Name (Last, First, Middle Initial) B. LAWRENCE ROEHRIG</p> <p>Mailing Address 13084 Lia Court</p> <p>City State Zip Code London MI 48451</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MI CN 25 EXECUTIVE DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1241.92</p>			<p>Date of Receipt 05 / 21 / 2014</p> <p>Transaction ID : SA11AI.48232</p> <p>Amount of Each Receipt this Period 106.88</p>	
<p>Full Name (Last, First, Middle Initial) C. LAWRENCE ROEHRIG</p> <p>Mailing Address 13084 Lia Court</p> <p>City State Zip Code London MI 48451</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MI CN 25 EXECUTIVE DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1311.92</p>			<p>Date of Receipt 05 / 27 / 2014</p> <p>Transaction ID : SA11AI.48391</p> <p>Amount of Each Receipt this Period 70.00</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			283.76	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 275 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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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. ALICE M ROGERS

Mailing Address 1111 Sturm Avenue

City State Zip Code
Walla Walla WA 99362

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME WA CN 28/STATE OF WA

Occupation
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 23 / 2014

Transaction ID : SA11AI.48350

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

B. PATRICK ROOHAN

Mailing Address 1327 Robinwood Lane

City State Zip Code
Faribault MN 55021

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MN RET CHPT 5

Occupation
RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 08 / 2014

Transaction ID : SA11AI.47390

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. JUAN ROSALES III

Mailing Address 5301 Apple Orchard Lane

City State Zip Code
Austin TX 78744

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation
ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.26

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.47177

Amount of Each Receipt this Period

24.16

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

545.16

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 276 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>Full Name (Last, First, Middle Initial) A. JUAN ROSALES III</p> <p>Mailing Address 5301 Apple Orchard Lane</p> <p>City State Zip Code Austin TX 78744</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L ORGANIZER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 238.42</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47602</p> <p>Amount of Each Receipt this Period 24.16</p>	
<p>Full Name (Last, First, Middle Initial) B. DIONISIO ROSARIO</p> <p>Mailing Address 1242 Holman Road</p> <p>City State Zip Code Oakland CA 94610</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME CA CN 57/EAST BAY PARKS PARK SUPERVISOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 340.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 19 / 2014 Transaction ID : SA11AI.48471</p> <p>Amount of Each Receipt this Period 100.00</p>	
<p>Full Name (Last, First, Middle Initial) C. DIONISIO ROSARIO</p> <p>Mailing Address 1242 Holman Road</p> <p>City State Zip Code Oakland CA 94610</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME CA CN 57/EAST BAY PARKS PARK SUPERVISOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 360.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 30 / 2014 Transaction ID : SA11AI.48472</p> <p>Amount of Each Receipt this Period 20.00</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>144.16</p>	
<p>TOTAL This Period (last page this line number only)..... ▶</p>			<p></p>	

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 277 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>Full Name (Last, First, Middle Initial) A. JOSEPH K. ROWE</p> <p>Mailing Address 34 Lakeside Drive</p> <p>City Honesdale State PA Zip Code 18431</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 430.00</p>			<p>Date of Receipt 05 / 12 / 2014 Transaction ID : SA11AI.47332 Amount of Each Receipt this Period 74.00 </p>	
<p>Full Name (Last, First, Middle Initial) B. SUSAN L. ROWE</p> <p>Mailing Address 207 9th Avenue</p> <p>City Slater State IA Zip Code 50244</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME IA CN 61/STATE OF IA Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 500.00</p>			<p>Date of Receipt 05 / 14 / 2014 Transaction ID : SA11AI.47776 Amount of Each Receipt this Period 50.00 </p>	
<p>Full Name (Last, First, Middle Initial) C. JOSEPH P. RUGOLA</p> <p>Mailing Address 6805 Oak Creek Drive</p> <p>City Columbus State OH Zip Code 43229</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4 Occupation EXECUTIVE DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 1046.00</p>			<p>Date of Receipt 05 / 12 / 2014 Transaction ID : SA11AI.48066 Amount of Each Receipt this Period 110.00 </p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>234.00</p>	
<p>TOTAL This Period (last page this line number only)..... ▶</p>			<p></p>	

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 278 OF 403
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>Full Name (Last, First, Middle Initial) A. JOSEPH P. RUGOLA</p> <p>Mailing Address 6805 Oak Creek Drive</p> <p>City State Zip Code Columbus OH 43229</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4 EXECUTIVE DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1156.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.48118</p> <p>Amount of Each Receipt this Period 110.00</p>		
<p>Full Name (Last, First, Middle Initial) B. JOSEPH P. RUGOLA</p> <p>Mailing Address 6805 Oak Creek Drive</p> <p>City State Zip Code Columbus OH 43229</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4 EXECUTIVE DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1170.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.48392</p> <p>Amount of Each Receipt this Period 14.00</p>		
<p>Full Name (Last, First, Middle Initial) C. JOSEPH P. RUGOLA</p> <p>Mailing Address 6805 Oak Creek Drive</p> <p>City State Zip Code Columbus OH 43229</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4 EXECUTIVE DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1280.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 29 / 2014 Transaction ID : SA11AI.48171</p> <p>Amount of Each Receipt this Period 110.00</p>		
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>234.00</p>		
<p>TOTAL This Period (last page this line number only)..... ▶</p>					

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 279 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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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. VEDA RUGOLA

Mailing Address 7781 Powderhorn Lane

City State Zip Code
 Westerville OH 43081

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 29 / 2014

Transaction ID : SA11AI.49042

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. BLAINE J. RUMMEL

Mailing Address 5 E. Glebe Road
 Apt. D

City State Zip Code
 Alexandria VA 22305

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, COMMUNICATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

519.03

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 15 / 2014

Transaction ID : SA11AI.47178

Amount of Each Receipt this Period

59.05

Full Name (Last, First, Middle Initial)

C. BLAINE J. RUMMEL

Mailing Address 5 E. Glebe Road
 Apt. D

City State Zip Code
 Alexandria VA 22305

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, COMMUNICATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

578.08

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 27 / 2014

Transaction ID : SA11AI.47603

Amount of Each Receipt this Period

59.05

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

368.10

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 280 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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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. VERA SAADE

Mailing Address 1309 Vine Street

City

Lansing

State

MI

Zip Code

48912

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

ASSISTANT DIRECTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

222.75

Date of Receipt

05 / 21 / 2014

Transaction ID : SA11AI.48233

Amount of Each Receipt this Period

24.75

Full Name (Last, First, Middle Initial)

B. JEFFREY C. SABIN

Mailing Address 624 Cleveland Street

City

Eveleth

State

MN

Zip Code

55734

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MN CN 5/CN14

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

249.70

Date of Receipt

05 / 06 / 2014

Transaction ID : SA11AI.48614

Amount of Each Receipt this Period

49.94

Full Name (Last, First, Middle Initial)

C. GEORGE SACHARIAN

Mailing Address 126 S. Lynn Blvd.

City

Upper Darby

State

PA

Zip Code

19082

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

369.50

Date of Receipt

05 / 12 / 2014

Transaction ID : SA11AI.47333

Amount of Each Receipt this Period

73.90

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

148.59

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 281 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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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. CARRIE B. SACHSE		Date of Receipt M M / D D / Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47179	
Mailing Address 3506 Hershey Road		Amount of Each Receipt this Period 22.89	
City Erie	State PA	Zip Code 16506	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation ORGANIZER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.79		
Full Name (Last, First, Middle Initial) B. CARRIE B. SACHSE		Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47604	
Mailing Address 3506 Hershey Road		Amount of Each Receipt this Period 22.89	
City Erie	State PA	Zip Code 16506	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation ORGANIZER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 238.68		
Full Name (Last, First, Middle Initial) C. CURTIS C. SALOW		Date of Receipt M M / D D / Y Y Y Y Y 05 / 14 / 2014 Transaction ID : SA11AI.47777	
Mailing Address 317 4th Avenue S E		Amount of Each Receipt this Period 30.00	
City Independence	State IA	Zip Code 50644	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME IA CN 61/STATE OF IA	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		
SUBTOTAL of Receipts This Page (optional).....		75.78	
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 282 OF 403

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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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. KYM S. SALOW

Mailing Address 317 4th Avenue S E

City State Zip Code
 Independence IA 50644

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME IA CN 61/STATE OF IA

Occupation
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 14 / 2014

Transaction ID : SA11AI.47778

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. HAIG SARAFIAN

Mailing Address 1212 Jefferson Street SE

City State Zip Code
 Olympia WA 98501

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME WA CN 28/STATE OF WA

Occupation
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 09 / 2014

Transaction ID : SA11AI.48300

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. HAIG SARAFIAN

Mailing Address 1212 Jefferson Street SE

City State Zip Code
 Olympia WA 98501

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME WA CN 28/STATE OF WA

Occupation
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 23 / 2014

Transaction ID : SA11AI.48351

Amount of Each Receipt this Period

25.00

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 283 OF 403

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>Full Name (Last, First, Middle Initial) A. WILBERT R. SATTLER</p> <p>Mailing Address 73981 Morgan Hill Road</p> <p>City State Zip Code Adena OH 43901</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 11/STATE OF OH CORRECTION OFFICER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 220.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y 05 / 30 / 2014 Transaction ID : SA11AI.48574</p> <p>Amount of Each Receipt this Period 20.00</p>		
<p>Full Name (Last, First, Middle Initial) B. LEE A. SAUNDERS</p> <p>Mailing Address 7510 Alaska Avenue NW</p> <p>City State Zip Code Washington DC 20012</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L PRESIDENT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1131.75</p>			<p>Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47180</p> <p>Amount of Each Receipt this Period 125.75</p>		
<p>Full Name (Last, First, Middle Initial) C. LEE A. SAUNDERS</p> <p>Mailing Address 7510 Alaska Avenue NW</p> <p>City State Zip Code Washington DC 20012</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L PRESIDENT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1257.50</p>			<p>Date of Receipt M M / D D / Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47605</p> <p>Amount of Each Receipt this Period 125.75</p>		
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>271.50</p>		
<p>TOTAL This Period (last page this line number only)..... ▶</p>					

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER:
 (check only one)

PAGE 284 OF 403

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. MARIANNE SAUNDERS

Mailing Address 48 Mullen Street

City

Uniontown

State

PA

Zip Code

15401-4060

FEC ID number of contributing federal political committee.

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	1	4

Transaction ID : SA11AI.47335

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

B. SHELLIE A. SAVAGE

Mailing Address 11540 Waddell Creek Rd. SW

City

Olympia

State

WA

Zip Code

98512

FEC ID number of contributing federal political committee.

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	9		2	0	1	4

Transaction ID : SA11AI.48301

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. SHELLIE A. SAVAGE

Mailing Address 11540 Waddell Creek Rd. SW

City

Olympia

State

WA

Zip Code

98512

FEC ID number of contributing federal political committee.

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	1	4

Transaction ID : SA11AI.48352

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

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

Aggregate Year-to-Date ▼

Aggregate Year-to-Date ▼

Month	Year-to-Date Sales
Jan	10.00
Feb	20.00
Mar	30.00
Apr	40.00
May	50.00
Jun	60.00
Jul	70.00
Aug	80.00
Sep	90.00
Oct	100.00
Nov	110.00
Dec	247.00

49.40

Aggregate Year-to-Date ▼

243.19

48.98

148.38

[illegible]

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 286 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>Full Name (Last, First, Middle Initial) A. JAMES SCHMITZ</p> <p>Mailing Address 6437 Rock Forest Drive #305</p> <p>City State Zip Code Bethesda MD 20817</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L/STATE STREET RETIREE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 316.77</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 01 / 2014</p> <p>Transaction ID : SA11AI.47429</p> <p>Amount of Each Receipt this Period 63.96</p>
<p>Full Name (Last, First, Middle Initial) B. TAMMY SCHOLL</p> <p>Mailing Address 4031 Executive Park Drive</p> <p>City State Zip Code Harrisburg PA 17111</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME PA CN 13 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 247.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014</p> <p>Transaction ID : SA11AI.47338</p> <p>Amount of Each Receipt this Period 49.40</p>
<p>Full Name (Last, First, Middle Initial) C. DARL D. SCHOSSOW</p> <p>Mailing Address 1910 2nd Avenue P.O. Box 189</p> <p>City State Zip Code Newport MN 55055</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MN CN 5/STATE OF MN STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1100.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 28 / 2014</p> <p>Transaction ID : SA11AI.47882</p> <p>Amount of Each Receipt this Period 200.00</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		<p>313.36</p>
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER:
 (check only one)

PAGE 287 OF 403

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. ERIC SCHUBERT

Mailing Address 132 College Avenue

City

Elmhurst

State

PA

Zip Code

18416

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

369.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	1	4

Transaction ID : SA11AI.47339

Amount of Each Receipt this Period

73.90

Full Name (Last, First, Middle Initial)

B. MARY SCHWANGER

Mailing Address 419 Valley Street

City

Marysville

State

PA

Zip Code

17053

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

657.10

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	1	4

Transaction ID : SA11AI.47340

Amount of Each Receipt this Period

117.42

Full Name (Last, First, Middle Initial)

C. JESSIE M. SCOTT

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

AFSCME OH LOC 11/STATE OF OH

Occupation

ACCOUNT CLERK I

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

328.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	2		2	0	1	4

Transaction ID : SA11AI.48535

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)..... ►

231.32

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 288 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>Full Name (Last, First, Middle Initial) A. JESSIE M. SCOTT</p> <p>Mailing Address P.O. Box 13886</p> <p>City State Zip Code Columbus OH 43213</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 11/STATE OF OH ACCOUNT CLERK I</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 368.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 16 / 2014 Transaction ID : SA11AI.48555</p> <p>Amount of Each Receipt this Period 40.00</p>
<p>Full Name (Last, First, Middle Initial) B. JESSIE M. SCOTT</p> <p>Mailing Address P.O. Box 13886</p> <p>City State Zip Code Columbus OH 43213</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 11/STATE OF OH ACCOUNT CLERK I</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 408.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 30 / 2014 Transaction ID : SA11AI.48575</p> <p>Amount of Each Receipt this Period 40.00</p>
<p>Full Name (Last, First, Middle Initial) C. VIRGINIA L. SCOTT</p> <p>Mailing Address 513 Navaho Drive</p> <p>City State Zip Code Loveland OH 45140</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4/SYCAMORE CCSD BUS DRIVER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 233.92</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.49003</p> <p>Amount of Each Receipt this Period 80.00</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		<p>160.00</p>
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 289 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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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. VIRGINIA L. SCOTT

Mailing Address 513 Navaho Drive

City

Loveland

State

OH

Zip Code

45140

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/SYCAMORE CCSD

Occupation

BUS DRIVER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

253.16

Date of Receipt

05 / 12 / 2014

Transaction ID : SA11AI.49004

Amount of Each Receipt this Period

19.24

Full Name (Last, First, Middle Initial)

B. VIRGINIA L. SCOTT

Mailing Address 513 Navaho Drive

City

Loveland

State

OH

Zip Code

45140

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/SYCAMORE CCSD

Occupation

BUS DRIVER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

272.40

Date of Receipt

05 / 12 / 2014

Transaction ID : SA11AI.49005

Amount of Each Receipt this Period

19.24

Full Name (Last, First, Middle Initial)

C. VIRGINIA L. SCOTT

Mailing Address 513 Navaho Drive

City

Loveland

State

OH

Zip Code

45140

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/SYCAMORE CCSD

Occupation

BUS DRIVER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

291.64

Date of Receipt

05 / 27 / 2014

Transaction ID : SA11AI.49006

Amount of Each Receipt this Period

19.24

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

57.72

✗	11a		11b		11c		12		
	13		14		15		16		17

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

294.31

33.19

327.50

33.19

597.54

66.99

133.37

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 291 OF 403
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>Full Name (Last, First, Middle Initial) A. SHELLEY K. SEEBERG</p> <p>Mailing Address 7529 Florine Avenue</p> <p>City State Zip Code Las Vegas NV 89129</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L REGIONAL DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 664.53</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47607</p> <p>Amount of Each Receipt this Period 66.99</p>
<p>Full Name (Last, First, Middle Initial) B. ELIOT A. SEIDE</p> <p>Mailing Address 300 Hardman Avenue South</p> <p>City State Zip Code South St. Paul MN 55075</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MN CN 5/CN14 EXECUTIVE DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 542.74</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 06 / 2014 Transaction ID : SA11AI.48615</p> <p>Amount of Each Receipt this Period 97.54</p>
<p>Full Name (Last, First, Middle Initial) C. ELIOT A. SEIDE</p> <p>Mailing Address 300 Hardman Avenue South</p> <p>City State Zip Code South St. Paul MN 55075</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MN CN 5/CN14 EXECUTIVE DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 556.74</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.48393</p> <p>Amount of Each Receipt this Period 14.00</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		<p>178.53</p>
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 292 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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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. NICHOLAS A. SERRANO

Mailing Address 3003 Van Ness Street NW
Apt. S217

City State Zip Code
Washington DC 20008

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOCIATE GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.16

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.47183

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

B. NICHOLAS A. SERRANO

Mailing Address 3003 Van Ness Street NW
Apt. S217

City State Zip Code
Washington DC 20008

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOCIATE GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.16

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.47608

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

C. DOMINIC SGRO

Mailing Address 144 Stormer Road

City State Zip Code
Indiana PA 15701-0144

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

587.10

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 12 / 2014

Transaction ID : SA11AI.47341

Amount of Each Receipt this Period

117.42

SUBTOTAL of Receipts This Page (optional)..... ►

193.42

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:
(check only one)

PAGE 293 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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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 E. SHANNON III

Mailing Address 1614 Omar Drive

City State Zip Code
Columbus OH 43207

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

ODJFS CUSTOMER SERVICE REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

05 / 02 / 2014

Transaction ID : SA11AI.48536

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. JOE E. SHANNON III

Mailing Address 1614 Omar Drive

City State Zip Code
Columbus OH 43207

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

ODJFS CUSTOMER SERVICE REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 16 / 2014

Transaction ID : SA11AI.48556

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. JOE E. SHANNON III

Mailing Address 1614 Omar Drive

City State Zip Code
Columbus OH 43207

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

ODJFS CUSTOMER SERVICE REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

05 / 30 / 2014

Transaction ID : SA11AI.48576

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

75.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 294 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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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. GARY SHIMER

Mailing Address 5421 Marcy Street

City

Warren

State

MI

Zip Code

48091

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.96

Date of Receipt

05 / 08 / 2014

Transaction ID : SA11AI.48211

Amount of Each Receipt this Period

29.12

Full Name (Last, First, Middle Initial)

B. GARY SHIMER

Mailing Address 5421 Marcy Street

City

Warren

State

MI

Zip Code

48091

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.08

Date of Receipt

05 / 21 / 2014

Transaction ID : SA11AI.48234

Amount of Each Receipt this Period

29.12

Full Name (Last, First, Middle Initial)

C. SANDRA S. SHONBORN

Mailing Address P.O. Box 123

City

Jacksonville

State

OH

Zip Code

45740

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH CN 8

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

438.72

Date of Receipt

05 / 06 / 2014

Transaction ID : SA11AI.47837

Amount of Each Receipt this Period

87.98

SUBTOTAL of Receipts This Page (optional)..... ►

146.22

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 295 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 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. BETTY J. SIMMONS-TALLEY Full Name (Last, First, Middle Initial) Mailing Address 2189 Lexington Avenue City Columbus State OH Zip Code 43211 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation BUS DRIVER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 290.00		Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.47378 Amount of Each Receipt this Period 25.00
B. BETTY J. SIMMONS-TALLEY Full Name (Last, First, Middle Initial) Mailing Address 2189 Lexington Avenue City Columbus State OH Zip Code 43211 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation BUS DRIVER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 315.00		Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47434 Amount of Each Receipt this Period 25.00
C. ISSA J. SIMPSON Full Name (Last, First, Middle Initial) Mailing Address 1139 S.E. 16th Avenue City Portland State OR Zip Code 97214-3705 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OR CN 75 Occupation OFFICE SPECIALIST Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 05 / 30 / 2014 Transaction ID : SA11AI.47922 Amount of Each Receipt this Period 60.00
SUBTOTAL of Receipts This Page (optional)..... ▶		110.00
TOTAL This Period (last page this line number only)..... ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 296 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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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. APRIL SIMS

Mailing Address 631 110th Street S

City State Zip Code
Tacoma WA 98444

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME WA CN 28

Occupation

LPA FIELD COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 13 / 2014

Transaction ID : SA11AI.48353

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. TODD L. SINGER

Mailing Address 1030 6th Avenue

City State Zip Code
Steelton PA 17113

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13/STATE OF PA

Occupation

ADMINISTRATIVE/CLERICAL

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
05 / 30 / 2014

Transaction ID : SA11AI.48811

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. ROBERT M. SKEES

Mailing Address 643 Grandview Avenue

City State Zip Code
Pittsburgh PA 15202

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13/STATE OF PA

Occupation

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
05 / 30 / 2014

Transaction ID : SA11AI.48812

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

130.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 297 OF 403

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. ROBERTA J. SKOKMailing Address 775 Township Road
#2204

City	State	Zip Code
Perrysville	OH	44864

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH CN 8

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.72

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	06	/	2014

Transaction ID : SA11AI.47838

Amount of Each Receipt this Period

87.58

Full Name (Last, First, Middle Initial)

B. TERRY SKULTETY

Mailing Address 222 Meade Street

City	State	Zip Code
Homer City	PA	15748

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	12	/	2014

Transaction ID : SA11AI.47342

Amount of Each Receipt this Period

73.90

Full Name (Last, First, Middle Initial)

C. BETTY SMITH

Mailing Address 19292 Archer

City	State	Zip Code
Detroit	MI	48219

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

ASSISTANT TO THE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	08	/	2014

Transaction ID : SA11AI.48212

Amount of Each Receipt this Period

33.26

SUBTOTAL of Receipts This Page (optional)..... ►

194.74

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 298 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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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. BETTY SMITH

Mailing Address 19292 Archer

City
Detroit

State Zip Code
MI 48219

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

ASSISTANT TO THE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.34

Date of Receipt

05 / 21 / 2014

Transaction ID : SA11AI.48235

Amount of Each Receipt this Period

33.26

Full Name (Last, First, Middle Initial)

B. CONNIE SMITH

Mailing Address 1739 E 24th Street

City
Capitol Heights

State Zip Code
IA 50317

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME IA CN 61

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

293.30

Date of Receipt

05 / 08 / 2014

Transaction ID : SA11AI.48877

Amount of Each Receipt this Period

58.66

Full Name (Last, First, Middle Initial)

C. DEREK L. SMITH

Mailing Address 4306 Broken Arrow Court

City
Clinton

State Zip Code
MD 20735

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, GENERAL SERVICE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.39

Date of Receipt

05 / 15 / 2014

Transaction ID : SA11AI.47185

Amount of Each Receipt this Period

47.71

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

139.63

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 299 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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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. DEREK L. SMITH

Mailing Address 4306 Broken Arrow Court

City State Zip Code
Clinton MD 20735

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, GENERAL SERVICE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

477.10

Date of Receipt

05 / 27 / 2014

Transaction ID : SA11AI.47610

Amount of Each Receipt this Period

47.71

Full Name (Last, First, Middle Initial)

B. KRISTIN SMITH

Mailing Address 4031 Executive Park Drive

City State Zip Code
Harrisburg PA 17111

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

05 / 12 / 2014

Transaction ID : SA11AI.47344

Amount of Each Receipt this Period

49.40

Full Name (Last, First, Middle Initial)

C. MICHELLE L SMITH

Mailing Address 2100 Stonepath St

City State Zip Code
Lorain OH 44052

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 11

Occupation

ODJFS CUSTOMER SERVI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

05 / 16 / 2014

Transaction ID : SA11AI.48557

Amount of Each Receipt this Period

22.50

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

119.61

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 300 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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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. MICHELLE L SMITH

Mailing Address 2100 Stonepath St

City

Lorain

State

OH

Zip Code

44052

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 11

Occupation

ODJFS CUSTOMER SERVI

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

227.50

Date of Receipt

05 / 30 / 2014

Transaction ID : SA11AI.48577

Amount of Each Receipt this Period

22.50

Full Name (Last, First, Middle Initial)

B. NORMAN L. SNYDER

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

AFSCME MN CN 5/RAMSEY COUNTY

Occupation

COUNSELOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

510.00

Date of Receipt

05 / 28 / 2014

Transaction ID : SA11AI.47879

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. DARRIN SPANN

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

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

401.96

Date of Receipt

05 / 12 / 2014

Transaction ID : SA11AI.47345

Amount of Each Receipt this Period

98.18

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

220.68

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 301 OF 403

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. ELIZABETH M. SPARKS

Mailing Address 817 220th St.

City

Baldwin

State

WI

Zip Code

54002

FEC ID number of contributing federal political committee.

Name of Employer

AFSCME INT'L

Occupation

ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	7		2	0	1	4

Transaction ID : SA11AI.47611

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

B. EDITHIA M. SPEARS

Mailing Address 4690 Ascot Drive

City

Columbus

State

OH

Zip Code

43229

FEC ID number of contributing federal political committee.

Name of Employer

AFSCME OH CN 8

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	6		2	0	1	4

Transaction ID : SA11AI.47839

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. JAMES L. SPEARS JR.

Mailing Address 6402 Tunston Lane

City

Charlotte

State

NC

Zip Code

28269

FEC ID number of contributing federal political committee.

Name of Employer

AFSCME INT'L

Occupation

FIELD COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	1	4

Transaction ID : SA11AI.47187

Amount of Each Receipt this Period

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 302 OF 403
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JAMES L. SPEARS JR. Full Name (Last, First, Middle Initial) Mailing Address 6402 Tunston Lane City Charlotte State NC Zip Code 28269 FEC ID number of contributing federal political committee. C Name of Employer AFSCME INT'L Occupation FIELD COORDINATOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00		Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47612 Amount of Each Receipt this Period 36.00
B. BEVERLY J. SPETZ Full Name (Last, First, Middle Initial) Mailing Address 112 Elmwood Street City Delta State OH Zip Code 43515 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH LOC 4 Occupation ORGANIZER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 439.74		Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.48069 Amount of Each Receipt this Period 48.86
C. BEVERLY J. SPETZ Full Name (Last, First, Middle Initial) Mailing Address 112 Elmwood Street City Delta State OH Zip Code 43515 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH LOC 4 Occupation ORGANIZER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 488.60		Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.48121 Amount of Each Receipt this Period 48.86
SUBTOTAL of Receipts This Page (optional)..... ▶		133.72
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:
(check only one)

PAGE 303 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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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. BEVERLY J. SPETZ

Mailing Address 112 Elmwood Street

City State Zip Code
Delta OH 43515

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

537.46

Date of Receipt

05 / 29 / 2014

Transaction ID : SA11AI.48174

Amount of Each Receipt this Period

48.86

Full Name (Last, First, Middle Initial)

B. JAMES SPRAGUE

Mailing Address 1212 Jefferson St., SE
Suite 300

City State Zip Code
Olympia WA 98501

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

05 / 09 / 2014

Transaction ID : SA11AI.48302

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. JAMES SPRAGUE

Mailing Address 1212 Jefferson St., SE
Suite 300

City State Zip Code
Olympia WA 98501

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 23 / 2014

Transaction ID : SA11AI.48354

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

98.86

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:
(check only one)

PAGE 304 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>Full Name (Last, First, Middle Initial) A. KAMALA B. SRIKAR</p> <p>Mailing Address 9908 Colebrook Avenue</p> <p>City Potomac State MD Zip Code 20854</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation ASSOC. DIRECTOR, CONF & TRAVEL SVCS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 496.71</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47188 </p> <p>Amount of Each Receipt this Period 55.19</p>
<p>Full Name (Last, First, Middle Initial) B. KAMALA B. SRIKAR</p> <p>Mailing Address 9908 Colebrook Avenue</p> <p>City Potomac State MD Zip Code 20854</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation ASSOC. DIRECTOR, CONF & TRAVEL SVCS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 551.90</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47613 </p> <p>Amount of Each Receipt this Period 55.19</p>
<p>Full Name (Last, First, Middle Initial) C. THERESA A. ST. AORO</p> <p>Mailing Address 1545 Hamline Avenue N West Unit</p> <p>City St. Paul State MN Zip Code 55108</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME MN CN 5/STATE OF MN Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 275.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 28 / 2014 Transaction ID : SA11AI.47880 </p> <p>Amount of Each Receipt this Period 50.00</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		160.38
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 305 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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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. JAMES A STANLEY

Mailing Address 2939 Graham Rd

City

Falls Church

State

VA

Zip Code

22842

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

301.15

Date of Receipt

05 / 15 / 2014

Transaction ID : SA11AI.47189

Amount of Each Receipt this Period

34.87

Full Name (Last, First, Middle Initial)

B. JAMES A STANLEY

Mailing Address 2939 Graham Rd

City

Falls Church

State

VA

Zip Code

22842

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

336.02

Date of Receipt

05 / 27 / 2014

Transaction ID : SA11AI.47614

Amount of Each Receipt this Period

34.87

Full Name (Last, First, Middle Initial)

C. RUTH M STEINMETZ

Mailing Address 6 Tegner Court

City

Rockville

State

MD

Zip Code

20850

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSIST. DIRECTOR, CONF. & TRVL SVCS

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

378.99

Date of Receipt

05 / 15 / 2014

Transaction ID : SA11AI.47191

Amount of Each Receipt this Period

42.11

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

111.85

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER:
 (check only one)

PAGE 306 OF 403

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. RUTH M STEINMETZ

Mailing Address 6 Tegner Court

City

Rockville

State

MD

Zip Code

20850

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSIST. DIRECTOR, CONF. & TRVL SVCS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

421.10

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	7		2	0	1	4

Transaction ID : SA11AI.47616

Amount of Each Receipt this Period

42.11

Full Name (Last, First, Middle Initial)

B. MICHELE STELOVICH
Mailing Address 21114 77th Place West
Apt. #102

City

Edmonds

State

WA

Zip Code

98026

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	1	4

Transaction ID : SA11AI.48355

Amount of Each Receipt this Period

22.00

Full Name (Last, First, Middle Initial)

C. JUDY R. STEVENS

Mailing Address 7150 Westfield Court

City

Alexandria

State

VA

Zip Code

22306

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

STRATEGIC ANALYST III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

442.98

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	1	4

Transaction ID : SA11AI.47192

Amount of Each Receipt this Period

49.22

SUBTOTAL of Receipts This Page (optional)..... ►

113.33

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 307 OF 403

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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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. JUDY R. STEVENS

Mailing Address 7150 Westfield Court

City

Alexandria

State

VA

Zip Code

22306

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

STRATEGIC ANALYST III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

492.20

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.47617

Amount of Each Receipt this Period

49.22

Full Name (Last, First, Middle Initial)

B. KATHLEEN M. STEWART

Mailing Address 7326 State Route 19

City

Mount Gilead

State

OH

Zip Code

43338

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

ACCOUNTANT/EXAMINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 30 / 2014

Transaction ID : SA11AI.48578

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. GREGORY S. STIGER

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

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.30

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 12 / 2014

Transaction ID : SA11AI.47346

Amount of Each Receipt this Period

47.46

SUBTOTAL of Receipts This Page (optional)..... ►

116.68

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:
(check only one)

PAGE 308 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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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. ANDREA STRADER

Mailing Address 1234 Massachusetts Avenue NW
#524

City State Zip Code
Washington DC 20005

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

POLITICAL ACTION REPRESENTATIVE III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.89

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.47194

Amount of Each Receipt this Period

50.21

Full Name (Last, First, Middle Initial)

B. ANDREA STRADER

Mailing Address 1234 Massachusetts Avenue NW
#524

City State Zip Code
Washington DC 20005

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

POLITICAL ACTION REPRESENTATIVE III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

502.10

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.47619

Amount of Each Receipt this Period

50.21

Full Name (Last, First, Middle Initial)

C. TRACY STRAUSSER

Mailing Address 217 Driftwood Drive

City State Zip Code
Canonsburg PA 15317

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

FIELD ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.04

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.47195

Amount of Each Receipt this Period

29.56

SUBTOTAL of Receipts This Page (optional)..... ►

129.98

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 309 OF 403
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. TRACY STRAUSSER

Mailing Address 217 Driftwood Drive

City

Canonsburg

State

PA

Zip Code

15317

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

FIELD ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

295.60

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	7		2	0	1	4

Transaction ID : SA11AI.47620

Amount of Each Receipt this Period

29.56

Full Name (Last, First, Middle Initial)

B. TIMOTHY J. STRECKER
Mailing Address 70 I Street SE
Apt. 736

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, INFORMATION SYS

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

524.25

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	1	4

Transaction ID : SA11AI.47196

Amount of Each Receipt this Period

58.25

Full Name (Last, First, Middle Initial)

C. TIMOTHY J. STRECKER
Mailing Address 70 I Street SE
Apt. 736

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, INFORMATION SYS

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

582.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	7		2	0	1	4

Transaction ID : SA11AI.47621

Amount of Each Receipt this Period

58.25

SUBTOTAL of Receipts This Page (optional)..... ►

146.06

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:
(check only one)

PAGE 310 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>Full Name (Last, First, Middle Initial) A. MARY J. STUCKERT</p> <p>Mailing Address 814 S. Spring Street</p> <p>City State Zip Code Bucyrus OH 44820</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 11/STATE OF OH ODJFS CUSTOMER SERVICE REP</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 210.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 16 / 2014 Transaction ID : SA11AI.48559</p> <p>Amount of Each Receipt this Period 21.00</p>	
<p>Full Name (Last, First, Middle Initial) B. MARY J. STUCKERT</p> <p>Mailing Address 814 S. Spring Street</p> <p>City State Zip Code Bucyrus OH 44820</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 11/STATE OF OH ODJFS CUSTOMER SERVICE REP</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 231.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 30 / 2014 Transaction ID : SA11AI.48579</p> <p>Amount of Each Receipt this Period 21.00</p>	
<p>Full Name (Last, First, Middle Initial) C. ARLENE STURDIVANT</p> <p>Mailing Address 6113 Kolb Street</p> <p>City State Zip Code Fairmont Heights MD 20743</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L ADMINISTRATIVE ASSISTANT I</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 220.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47197</p> <p>Amount of Each Receipt this Period 25.00</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>67.00</p>	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 311 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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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. ARLENE STURDIVANT

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

AFSCME INT'L

Occupation

ADMINISTRATIVE ASSISTANT I

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

245.00

Date of Receipt

05 / 27 / 2014

Transaction ID : SA11AI.47622

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. RENATA L. STURTEVANT

Mailing Address W9695 Lake Drive

City

Edgerton

State

WI

Zip Code

53534

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME WI CN 24/STATE OF WI

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

220.00

Date of Receipt

05 / 21 / 2014

Transaction ID : SA11AI.48421

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. WANDA M. SUBER

Mailing Address 805 Broderick Drive

City

Oxon Hill

State

MD

Zip Code

20745

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

STAFF ACCOUNTANT III

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

333.00

Date of Receipt

05 / 15 / 2014

Transaction ID : SA11AI.47198

Amount of Each Receipt this Period

37.00

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:
 (check only one)

PAGE 312 OF 403

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. WANDA M. SUBER		Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47623	
Mailing Address 805 Broderick Drive		Amount of Each Receipt this Period 370.00	
City Oxon Hill	State MD	Zip Code 20745	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 370.00	
Name of Employer AFSCME INT'L		Occupation STAFF ACCOUNTANT III	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Full Name (Last, First, Middle Initial) B. MICHAEL E. SUKAL		Date of Receipt M M / D D / Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47199	
Mailing Address 18033 Mill Creek Drive		Amount of Each Receipt this Period 79.61	
City Derwood	State MD	Zip Code 20855	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 716.49	
Name of Employer AFSCME INT'L		Occupation DIRECTOR, ORGANIZING & FIELD SVCS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Full Name (Last, First, Middle Initial) C. MICHAEL E. SUKAL		Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47624	
Mailing Address 18033 Mill Creek Drive		Amount of Each Receipt this Period 79.61	
City Derwood	State MD	Zip Code 20855	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 796.10	
Name of Employer AFSCME INT'L		Occupation DIRECTOR, ORGANIZING & FIELD SVCS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
SUBTOTAL of Receipts This Page (optional)..... ▶		196.22	
TOTAL This Period (last page this line number only)..... ▶			

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 313 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>Full Name (Last, First, Middle Initial) A. MARY E. SULLIVAN</p> <p>Mailing Address 1880 9th Avenue</p> <p>City State Zip Code Watervliet NY 12189</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME NY LOC 1000 EXECUTIVE VICE PRESIDENT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 650.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 08 / 2014 Transaction ID : SA11AI.47917</p> <p>Amount of Each Receipt this Period 25.00</p>		
<p>Full Name (Last, First, Middle Initial) B. MARY E. SULLIVAN</p> <p>Mailing Address 1880 9th Avenue</p> <p>City State Zip Code Watervliet NY 12189</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME NY LOC 1000 EXECUTIVE VICE PRESIDENT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 675.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 21 / 2014 Transaction ID : SA11AI.47918</p> <p>Amount of Each Receipt this Period 25.00</p>		
<p>Full Name (Last, First, Middle Initial) C. MARY E. SULLIVAN</p> <p>Mailing Address 1880 9th Avenue</p> <p>City State Zip Code Watervliet NY 12189</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME NY LOC 1000 EXECUTIVE VICE PRESIDENT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 775.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.48394</p> <p>Amount of Each Receipt this Period 100.00</p>		
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>150.00</p>		
<p>TOTAL This Period (last page this line number only)..... ▶</p>					

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 314 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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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. MICHAEL SVEDA

Mailing Address 439 Willow Circle

City

Allentown

State

PA

Zip Code

18102

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.80

Date of Receipt

05 / 12 / 2014

Transaction ID : SA11AI.47348

Amount of Each Receipt this Period

64.16

Full Name (Last, First, Middle Initial)

B. JAMES R. TACKETT

Mailing Address 517 S. High Street

City

Yellow Springs

State

OH

Zip Code

45387

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.58

Date of Receipt

05 / 12 / 2014

Transaction ID : SA11AI.48070

Amount of Each Receipt this Period

34.62

Full Name (Last, First, Middle Initial)

C. JAMES R. TACKETT

Mailing Address 517 S. High Street

City

Yellow Springs

State

OH

Zip Code

45387

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.20

Date of Receipt

05 / 27 / 2014

Transaction ID : SA11AI.48122

Amount of Each Receipt this Period

34.62

SUBTOTAL of Receipts This Page (optional)..... ►

133.40

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 315 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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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. JAMES R. TACKETT		Date of Receipt M M / D D / Y Y Y Y Y 05 / 29 / 2014 Transaction ID : SA11AI.48175	
Mailing Address 517 S. High Street City Yellow Springs State OH Zip Code 45387		Amount of Each Receipt this Period 34.62	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 380.82	
Full Name (Last, First, Middle Initial) B. JEFFREY M. TAGGART		Date of Receipt M M / D D / Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47200	
Mailing Address 12001 Market Street Unit 450 City Reston State VA Zip Code 20190		Amount of Each Receipt this Period 124.66	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L Occupation ASSOCIATE DIRECTOR, ACCTNG & AUDITIN			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1121.94	
Full Name (Last, First, Middle Initial) C. JEFFREY M. TAGGART		Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47625	
Mailing Address 12001 Market Street Unit 450 City Reston State VA Zip Code 20190		Amount of Each Receipt this Period 124.66	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L Occupation ASSOCIATE DIRECTOR, ACCTNG & AUDITIN			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1246.60	
SUBTOTAL of Receipts This Page (optional)..... ▶		283.94	
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:
(check only one)

PAGE 316 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>Full Name (Last, First, Middle Initial) A. MIGUEL TAMAYO</p> <p>Mailing Address 2201 Broadway Suite 715</p> <p>City State Zip Code Oakland CA 94612</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME LOC 3299, HED REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 390.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 21 / 2014 Transaction ID : SA11AI.48468</p> <p>Amount of Each Receipt this Period 130.00</p>
<p>Full Name (Last, First, Middle Initial) B. ANN M. TANNER</p> <p>Mailing Address 816 Wilder Avenue</p> <p>City State Zip Code Elyria OH 44035</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 323.60</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.47404</p> <p>Amount of Each Receipt this Period 50.00</p>
<p>Full Name (Last, First, Middle Initial) C. ANN M. TANNER</p> <p>Mailing Address 816 Wilder Avenue</p> <p>City State Zip Code Elyria OH 44035</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 352.80</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.48072</p> <p>Amount of Each Receipt this Period 29.20</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		<p>209.20</p>
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 317 OF 403

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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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. ANN M. TANNER

Mailing Address 816 Wilder Avenue

City State Zip Code
Elyria OH 44035

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

382.00

Date of Receipt

05 / 27 / 2014

Transaction ID : SA11AI.48124

Amount of Each Receipt this Period

29.20

Full Name (Last, First, Middle Initial)

B. ANN M. TANNER

Mailing Address 816 Wilder Avenue

City State Zip Code
Elyria OH 44035

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

411.20

Date of Receipt

05 / 29 / 2014

Transaction ID : SA11AI.48177

Amount of Each Receipt this Period

29.20

Full Name (Last, First, Middle Initial)

C. PATRICIA TARDY

Mailing Address 154 Conantville Road

City State Zip Code
Mansfield Ctr CT 06250-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME CT CN 4/LOCAL 1565

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 01 / 2014

Transaction ID : SA11AI.47905

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

158.40

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 318 OF 403

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>Full Name (Last, First, Middle Initial) A. PATRICIA TARDY</p> <p>Mailing Address 154 Conantville Road</p> <p>City Mansfield Ctr State CT Zip Code 06250-0000</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME CT CN 4/LOCAL 1565 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 400.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 22 / 2014 Transaction ID : SA11AI.47906</p> <p>Amount of Each Receipt this Period 100.00</p>
<p>Full Name (Last, First, Middle Initial) B. MOHAMMED TEHRANI</p> <p>Mailing Address 22110 Castleton Court</p> <p>City Boyds State MD Zip Code 20841</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation ASSISTANT DIRECTOR, NETWORK OPERA1</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 466.35</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47201</p> <p>Amount of Each Receipt this Period 52.28</p>
<p>Full Name (Last, First, Middle Initial) C. MOHAMMED TEHRANI</p> <p>Mailing Address 22110 Castleton Court</p> <p>City Boyds State MD Zip Code 20841</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation ASSISTANT DIRECTOR, NETWORK OPERA1</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 518.63</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.47626</p> <p>Amount of Each Receipt this Period 52.28</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		204.56
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 319 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>Full Name (Last, First, Middle Initial) A. MARTHA W. THAMES</p> <p>Mailing Address 1981 Wiler Lane</p> <p>City Toledo State OH Zip Code 43611</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation ORGANIZER II</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 311.40</p>			<p>Date of Receipt 05 / 15 / 2014 Transaction ID : SA11AI.47202</p> <p>Amount of Each Receipt this Period 25.95</p>		
<p>Full Name (Last, First, Middle Initial) B. MARTHA W. THAMES</p> <p>Mailing Address 1981 Wiler Lane</p> <p>City Toledo State OH Zip Code 43611</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation ORGANIZER II</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 337.35</p>			<p>Date of Receipt 05 / 27 / 2014 Transaction ID : SA11AI.47627</p> <p>Amount of Each Receipt this Period 25.95</p>		
<p>Full Name (Last, First, Middle Initial) C. PHYLLIS THEDE</p> <p>Mailing Address 2343 Hawthorne Court</p> <p>City Bettendorf State IA Zip Code 52722</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME IA CN 61/DAVENPORT CSD Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 235.36</p>			<p>Date of Receipt 05 / 20 / 2014 Transaction ID : SA11AI.48887</p> <p>Amount of Each Receipt this Period 100.00</p>		
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>151.90</p>		
<p>TOTAL This Period (last page this line number only)..... ▶</p>			<p></p>		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 320 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>Full Name (Last, First, Middle Initial) A. BETTY A. THOMAS</p> <p>Mailing Address 2006 Faycrest Drive</p> <p>City State Zip Code Cincinnati OH 45238</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH CN 8 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 227.36</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 06 / 2014 Transaction ID : SA11AI.47842</p> <p>Amount of Each Receipt this Period 45.70</p>	
<p>Full Name (Last, First, Middle Initial) B. JOHN THOMAS</p> <p>Mailing Address 1034 N Washington Avenue</p> <p>City State Zip Code Lansing MI 48906</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MI CN 25 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 232.96</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 08 / 2014 Transaction ID : SA11AI.48213</p> <p>Amount of Each Receipt this Period 29.12</p>	
<p>Full Name (Last, First, Middle Initial) C. JOHN THOMAS</p> <p>Mailing Address 1034 N Washington Avenue</p> <p>City State Zip Code Lansing MI 48906</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MI CN 25 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 262.08</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 21 / 2014 Transaction ID : SA11AI.48236</p> <p>Amount of Each Receipt this Period 29.12</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>103.94</p>	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 321 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>Full Name (Last, First, Middle Initial) A. PATRICK S. THOMASSON</p> <p>Mailing Address 1347 Marot Drive</p> <p>City State Zip Code Trotwood OH 45427</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH CN 8 LEAD STAFF ORGANIZER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 320.50</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 06 / 2014 Transaction ID : SA11AI.47843</p> <p>Amount of Each Receipt this Period 64.40</p>
<p>Full Name (Last, First, Middle Initial) B. PAULETTE E. THOMPSON</p> <p>Mailing Address 3902 154th Street E.</p> <p>City State Zip Code Tacoma WA 98446</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 219.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 09 / 2014 Transaction ID : SA11AI.48304</p> <p>Amount of Each Receipt this Period 25.00</p>
<p>Full Name (Last, First, Middle Initial) C. PAULETTE E. THOMPSON</p> <p>Mailing Address 3902 154th Street E.</p> <p>City State Zip Code Tacoma WA 98446</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 244.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 23 / 2014 Transaction ID : SA11AI.48356</p> <p>Amount of Each Receipt this Period 25.00</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		<p>114.40</p>
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 322 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>Full Name (Last, First, Middle Initial) A. ROBERT L. THOMPSON</p> <p>Mailing Address 927 Gibbs Avenue, NE</p> <p>City State Zip Code Canton OH 44705-1074</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH CN 8 REGIONAL DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 435.72</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 06 / 2014 Transaction ID : SA11AI.47844</p> <p>Amount of Each Receipt this Period 87.58</p>
<p>Full Name (Last, First, Middle Initial) B. PETER THOR</p> <p>Mailing Address 4 Betts Place</p> <p>City State Zip Code East Norwalk CT 06855-0000</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME CT CN 4 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 225.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 14 / 2014 Transaction ID : SA11AI.47901</p> <p>Amount of Each Receipt this Period 45.00</p>
<p>Full Name (Last, First, Middle Initial) C. GINGER THRASHER</p> <p>Mailing Address 13807 Oink Joint Road</p> <p>City State Zip Code Wadena MN 56482</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MN CN 65 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 270.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 01 / 2014 Transaction ID : SA11AI.48447</p> <p>Amount of Each Receipt this Period 50.00</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		<p>182.58</p>
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 323 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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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. GINGER THRASHER

Mailing Address 13807 Oink Joint Road

City State Zip Code
Wadena MN 56482

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MN CN 65

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.26

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 30 / 2014

Transaction ID : SA11AI.48456

Amount of Each Receipt this Period

72.26

Full Name (Last, First, Middle Initial)

B. TAMARA L. TOCHER

Mailing Address 321 SE 19th Street

City State Zip Code
Olympia WA 98501

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.97

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.47204

Amount of Each Receipt this Period

47.33

Full Name (Last, First, Middle Initial)

C. TAMARA L. TOCHER

Mailing Address 321 SE 19th Street

City State Zip Code
Olympia WA 98501

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

473.30

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.47629

Amount of Each Receipt this Period

47.33

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

166.92

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 324 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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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. CARRIE R. TOLLER

Mailing Address 513 Wood Street

City

Maysville

State

KY

Zip Code

41056

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

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 Y
05 / 30 / 2014

Transaction ID : SA11AI.48580

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. LEIGH TOMLINSON

Mailing Address 930 Stag Thicket Lane

City

Mason

State

MI

Zip Code

48854-1400

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

ACCTG. /HUMAN RESOURCE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.08

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 08 / 2014

Transaction ID : SA11AI.48214

Amount of Each Receipt this Period

38.26

Full Name (Last, First, Middle Initial)

C. LEIGH TOMLINSON

Mailing Address 930 Stag Thicket Lane

City

Mason

State

MI

Zip Code

48854-1400

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

ACCTG. /HUMAN RESOURCE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

344.34

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 21 / 2014

Transaction ID : SA11AI.48237

Amount of Each Receipt this Period

38.26

SUBTOTAL of Receipts This Page (optional)..... ►

96.52

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 325 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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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. ROSELLA P. TOPE

Mailing Address 9839 Oaklane Drive SE

City

Waynesburg

State

OH

Zip Code

44688

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/SANDY VALLEY

Occupation

TEACHER AIDE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

211.53

Date of Receipt

05 / 12 / 2014

Transaction ID : SA11AI.49007

Amount of Each Receipt this Period

38.46

Full Name (Last, First, Middle Initial)

B. TOM TOSTI

Mailing Address 327 Lincoln Avenue

City

Bristol

State

PA

Zip Code

19007

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

587.10

Date of Receipt

05 / 12 / 2014

Transaction ID : SA11AI.47350

Amount of Each Receipt this Period

117.42

Full Name (Last, First, Middle Initial)

C. DOROTHY L. TOWNSEND

Mailing Address 849 Cormac Drive

City

Riverdale

State

GA

Zip Code

30296

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

REGIONAL DIRECTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

620.32

Date of Receipt

05 / 15 / 2014

Transaction ID : SA11AI.47205

Amount of Each Receipt this Period

69.68

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

225.56

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 326 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>Full Name (Last, First, Middle Initial) A. DOROTHY L. TOWNSEND</p> <p>Mailing Address 849 Cormac Drive</p> <p>City Riverdale State GA Zip Code 30296</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation REGIONAL DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 691.03</p>		<p>Date of Receipt 05 / 27 / 2014 Transaction ID : SA11AI.47630</p> <p>Amount of Each Receipt this Period 70.71</p>
<p>Full Name (Last, First, Middle Initial) B. VON TREAS</p> <p>Mailing Address 4031 Executive Park Drive</p> <p>City Harrisburg State PA Zip Code 17111</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 350.80</p>		<p>Date of Receipt 05 / 12 / 2014 Transaction ID : SA11AI.47351</p> <p>Amount of Each Receipt this Period 64.16</p>
<p>Full Name (Last, First, Middle Initial) C. BONITA J. TUCKER-MERCADO</p> <p>Mailing Address 12106 Leeila Avenue</p> <p>City Cleveland State OH Zip Code 44135</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4/CUYAHOGA COUNTY Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 211.64</p>		<p>Date of Receipt 05 / 29 / 2014 Transaction ID : SA11AI.49010</p> <p>Amount of Each Receipt this Period 19.24</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		<p>154.11</p>
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

X	11a		11b		11c		12		
	13		14		15		16		17

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER: PAGE 328 OF 403
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. JOHN TWIFORD

Mailing Address 4031 Executive Park Drive

City	State	Zip Code
Harrisburg	PA	17111

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	12	/	2014

Transaction ID : SA11AI.47352

Amount of Each Receipt this Period

64.92

Full Name (Last, First, Middle Initial)

B. KAREN J. TYLER

Mailing Address 15 Milmarson Place NW

City	State	Zip Code
Washington	DC	20011

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, AUDITING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

481.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	15	/	2014

Transaction ID : SA11AI.47206

Amount of Each Receipt this Period

53.71

Full Name (Last, First, Middle Initial)

C. KAREN J. TYLER

Mailing Address 15 Milmarson Place NW

City	State	Zip Code
Washington	DC	20011

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, AUDITING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	27	/	2014

Transaction ID : SA11AI.47631

Amount of Each Receipt this Period

53.71

SUBTOTAL of Receipts This Page (optional)..... ▶

172.34

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 329 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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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. JOSE URIBE

Mailing Address 1707 Lindig Street
Apt. 7

City State Zip Code
St. Paul MN 55113

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.52

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.47207

Amount of Each Receipt this Period

22.28

Full Name (Last, First, Middle Initial)

B. JOSE URIBE

Mailing Address 1707 Lindig Street
Apt. 7

City State Zip Code
St. Paul MN 55113

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.80

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.47632

Amount of Each Receipt this Period

22.28

Full Name (Last, First, Middle Initial)

C. BARBARA S. UWEEKOOLANI

Mailing Address 888 Mililani Street
Suite 601

City State Zip Code
Honolulu HI 96813-2991

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME HI LOC 152

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 02 / 2014

Transaction ID : SA11AI.48000

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

94.56

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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FOR LINE NUMBER:
(check only one)

PAGE 330 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>Full Name (Last, First, Middle Initial) A. KAREN VALENTINE</p> <p>Mailing Address 702 Ponderosa Road</p> <p>City Magnolia State DE Zip Code 19962</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME DE CN 81 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 271.02</p>			<p>Date of Receipt 05 / 08 / 2014 Transaction ID : SA11AI.48018 </p> <p>Amount of Each Receipt this Period 65.34 </p>	
<p>Full Name (Last, First, Middle Initial) B. KAREN VALENTINE</p> <p>Mailing Address 702 Ponderosa Road</p> <p>City Magnolia State DE Zip Code 19962</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME DE CN 81 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 336.36</p>			<p>Date of Receipt 05 / 08 / 2014 Transaction ID : SA11AI.48025 </p> <p>Amount of Each Receipt this Period 65.34 </p>	
<p>Full Name (Last, First, Middle Initial) C. DONALD L. VAUGHAN</p> <p>Mailing Address 7614 187th Avenue SW</p> <p>City Rochester State WA Zip Code 98579</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME WA CN 28 Occupation WORKERS COMPENSATION TECH</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 220.00</p>			<p>Date of Receipt 05 / 23 / 2014 Transaction ID : SA11AI.48358 </p> <p>Amount of Each Receipt this Period 22.00 </p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>152.68</p>	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 331 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>Full Name (Last, First, Middle Initial) A. ANTHONY VERNELL</p> <p>Mailing Address 14 Meadow Lane</p> <p>City Athens State OH Zip Code 45701</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4 Occupation REGIONAL DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 270.00</p>			<p>Date of Receipt 05 / 12 / 2014 Transaction ID : SA11AI.48073 </p> <p>Amount of Each Receipt this Period 30.00</p>	
<p>Full Name (Last, First, Middle Initial) B. ANTHONY VERNELL</p> <p>Mailing Address 14 Meadow Lane</p> <p>City Athens State OH Zip Code 45701</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4 Occupation REGIONAL DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 310.00</p>			<p>Date of Receipt 05 / 20 / 2014 Transaction ID : SA11AI.49058 </p> <p>Amount of Each Receipt this Period 40.00</p>	
<p>Full Name (Last, First, Middle Initial) C. ANTHONY VERNELL</p> <p>Mailing Address 14 Meadow Lane</p> <p>City Athens State OH Zip Code 45701</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4 Occupation REGIONAL DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 340.00</p>			<p>Date of Receipt 05 / 27 / 2014 Transaction ID : SA11AI.48125 </p> <p>Amount of Each Receipt this Period 30.00</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			100.00	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 332 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>Full Name (Last, First, Middle Initial) A. ANTHONY VERNELL</p> <p>Mailing Address 14 Meadow Lane</p> <p>City State Zip Code Athens OH 45701</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4 REGIONAL DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 370.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 29 / 2014 Transaction ID : SA11AI.48178 </p> <p>Amount of Each Receipt this Period 30.00</p>
<p>Full Name (Last, First, Middle Initial) B. ANNIE WACKER</p> <p>Mailing Address 326 S. 82nd Street</p> <p>City State Zip Code Milwaukee WI 53214</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME WI CN 48/LOCAL 1954 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 220.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 06 / 2014 Transaction ID : SA11AI.48367 </p> <p>Amount of Each Receipt this Period 40.00</p>
<p>Full Name (Last, First, Middle Initial) C. SUSAN L. WAGONER</p> <p>Mailing Address 5434 Briardale Lane Apt. E</p> <p>City State Zip Code Dublin OH 43016</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH CN 8 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 375.58</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 06 / 2014 Transaction ID : SA11AI.47845 </p> <p>Amount of Each Receipt this Period 75.48</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		145.48
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 333 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>Full Name (Last, First, Middle Initial) A. MARGARET WALCOTT</p> <p>Mailing Address 200 Martin Luther King Jr. Blvd.</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Columbus</td> <td style="width: 33%;">State OH</td> <td style="width: 33%;">Zip Code 43203</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME OH LOC 4/COLUMBUS CITY</td> <td style="width: 33%;">Occupation CUSTODIAN</td> <td style="width: 33%;"></td> </tr> </table> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p>			City Columbus	State OH	Zip Code 43203	Name of Employer AFSCME OH LOC 4/COLUMBUS CITY	Occupation CUSTODIAN		<p>Date of Receipt</p> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> M M / D D / Y Y Y Y Y </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> 05 / 01 / 2014 </div> <p>Transaction ID : SA11AI.47383</p> <p>Amount of Each Receipt this Period</p> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 25.00 </div>	
City Columbus	State OH	Zip Code 43203								
Name of Employer AFSCME OH LOC 4/COLUMBUS CITY	Occupation CUSTODIAN									
<p>Full Name (Last, First, Middle Initial) B. MARGARET WALCOTT</p> <p>Mailing Address 200 Martin Luther King Jr. Blvd.</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Columbus</td> <td style="width: 33%;">State OH</td> <td style="width: 33%;">Zip Code 43203</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME OH LOC 4/COLUMBUS CITY</td> <td style="width: 33%;">Occupation CUSTODIAN</td> <td style="width: 33%;"></td> </tr> </table> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p>			City Columbus	State OH	Zip Code 43203	Name of Employer AFSCME OH LOC 4/COLUMBUS CITY	Occupation CUSTODIAN		<p>Date of Receipt</p> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> M M / D D / Y Y Y Y Y </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> 05 / 12 / 2014 </div> <p>Transaction ID : SA11AI.47387</p> <p>Amount of Each Receipt this Period</p> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 25.00 </div>	
City Columbus	State OH	Zip Code 43203								
Name of Employer AFSCME OH LOC 4/COLUMBUS CITY	Occupation CUSTODIAN									
<p>Full Name (Last, First, Middle Initial) C. MARGARET WALCOTT</p> <p>Mailing Address 200 Martin Luther King Jr. Blvd.</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Columbus</td> <td style="width: 33%;">State OH</td> <td style="width: 33%;">Zip Code 43203</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME OH LOC 4/COLUMBUS CITY</td> <td style="width: 33%;">Occupation CUSTODIAN</td> <td style="width: 33%;"></td> </tr> </table> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p>			City Columbus	State OH	Zip Code 43203	Name of Employer AFSCME OH LOC 4/COLUMBUS CITY	Occupation CUSTODIAN		<p>Date of Receipt</p> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> M M / D D / Y Y Y Y Y </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> 05 / 27 / 2014 </div> <p>Transaction ID : SA11AI.47435</p> <p>Amount of Each Receipt this Period</p> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 25.00 </div>	
City Columbus	State OH	Zip Code 43203								
Name of Employer AFSCME OH LOC 4/COLUMBUS CITY	Occupation CUSTODIAN									
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 75.00 </div>							
<p>TOTAL This Period (last page this line number only)..... ▶</p>			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> </div>							

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 334 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>Full Name (Last, First, Middle Initial) A. NAOMI A. WALKER</p> <p>Mailing Address 2229 First Street NW</p> <p>City Washington State DC Zip Code 20001</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation ASSISTANT TO THE PRESIDENT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 864.54</p>			<p>Date of Receipt 05 / 15 / 2014 Transaction ID : SA11AI.47208 </p> <p>Amount of Each Receipt this Period 96.06 </p>	
<p>Full Name (Last, First, Middle Initial) B. NAOMI A. WALKER</p> <p>Mailing Address 2229 First Street NW</p> <p>City Washington State DC Zip Code 20001</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation ASSISTANT TO THE PRESIDENT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 960.60</p>			<p>Date of Receipt 05 / 27 / 2014 Transaction ID : SA11AI.47633 </p> <p>Amount of Each Receipt this Period 96.06 </p>	
<p>Full Name (Last, First, Middle Initial) C. BARBARA J. WARD</p> <p>Mailing Address 13975 State Route 7</p> <p>City Proctorville State OH Zip Code 45669</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4/FAIRLAND LSD Occupation BUS DRIVER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 206.72</p>			<p>Date of Receipt 05 / 12 / 2014 Transaction ID : SA11AI.49013 </p> <p>Amount of Each Receipt this Period 20.84 </p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>212.96</p>	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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FOR LINE NUMBER: PAGE 335 OF 403
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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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. BARBARA J. WARD

Mailing Address 13975 State Route 7

City State Zip Code
Proctorville OH 45669

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 4/FAIRLAND LSD

Occupation
BUS DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.56

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 12 / 2014

Transaction ID : SA11AI.49014

Amount of Each Receipt this Period

20.84

Full Name (Last, First, Middle Initial)

B. BARBARA J. WARD

Mailing Address 13975 State Route 7

City State Zip Code
Proctorville OH 45669

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 4/FAIRLAND LSD

Occupation
BUS DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.40

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.49015

Amount of Each Receipt this Period

20.84

Full Name (Last, First, Middle Initial)

C. JAMES A. WARD

Mailing Address 5692 Northpointe Parkway

City State Zip Code
Lorain OH 44053

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 4/LORAIN COUNTY

Occupation
SOCIAL SERVICE AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 12 / 2014

Transaction ID : SA11AI.49016

Amount of Each Receipt this Period

80.00

SUBTOTAL of Receipts This Page (optional)..... ►

121.68

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 336 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>Full Name (Last, First, Middle Initial) A. JAMES A. WARD</p> <p>Mailing Address 5692 Northpointe Parkway</p> <p>City State Zip Code Lorain OH 44053</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4/LORAIN COUNTY SOCIAL SERVICE AIDE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 248.00</p>		<p>Date of Receipt 05 / 12 / 2014 Transaction ID : SA11AI.49017 </p> <p>Amount of Each Receipt this Period 42.00</p>
<p>Full Name (Last, First, Middle Initial) B. JAMES A. WARD</p> <p>Mailing Address 5692 Northpointe Parkway</p> <p>City State Zip Code Lorain OH 44053</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4/LORAIN COUNTY SOCIAL SERVICE AIDE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 290.00</p>		<p>Date of Receipt 05 / 27 / 2014 Transaction ID : SA11AI.49018 </p> <p>Amount of Each Receipt this Period 42.00</p>
<p>Full Name (Last, First, Middle Initial) C. DAVID WARRICK</p> <p>Mailing Address 2638 Jay Court</p> <p>City State Zip Code Indianapolis IN 46229</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L FIELD CORDINATOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 413.19</p>		<p>Date of Receipt 05 / 15 / 2014 Transaction ID : SA11AI.47209 </p> <p>Amount of Each Receipt this Period 45.91</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		129.91
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 337 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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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. DAVID WARRICK

Mailing Address 2638 Jay Court

City
Indianapolis

State Zip Code
IN 46229

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

FIELD CORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.10

Date of Receipt

05 / 27 / 2014

Transaction ID : SA11AI.47634

Amount of Each Receipt this Period

45.91

Full Name (Last, First, Middle Initial)

B. ANDRE' J. WASHINGTON

Mailing Address 45 Knollwood Drive

City
Perrysburg

State Zip Code
OH 43551

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.33

Date of Receipt

05 / 12 / 2014

Transaction ID : SA11AI.48074

Amount of Each Receipt this Period

37.37

Full Name (Last, First, Middle Initial)

C. ANDRE' J. WASHINGTON

Mailing Address 45 Knollwood Drive

City
Perrysburg

State Zip Code
OH 43551

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.70

Date of Receipt

05 / 27 / 2014

Transaction ID : SA11AI.48126

Amount of Each Receipt this Period

37.37

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.65

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 338 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>Full Name (Last, First, Middle Initial) A. ANDRE' J. WASHINGTON</p> <p>Mailing Address 45 Knollwood Drive</p> <p>City State Zip Code Perrysburg OH 43551</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4 FIELD REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 411.07</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 29 / 2014 Transaction ID : SA11AI.48179</p> <p>Amount of Each Receipt this Period 37.37</p>	
<p>Full Name (Last, First, Middle Initial) B. JO ANN WAUGH</p> <p>Mailing Address 4031 Executive Park Drive</p> <p>City State Zip Code Harrisburg PA 17111</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME PA CN 13 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 342.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.47354</p> <p>Amount of Each Receipt this Period 68.40</p>	
<p>Full Name (Last, First, Middle Initial) C. LONITA M. WAYBRIGHT</p> <p>Mailing Address 3929 Whitemarsh Lane</p> <p>City State Zip Code Edgewater MD 21037</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L ASSOCIATE DIRECTOR, BENEFITS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 524.25</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47211</p> <p>Amount of Each Receipt this Period 58.25</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>164.02</p>	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 339 OF 403

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. LONITA M. WAYBRIGHT

Mailing Address 3929 Whitemarsh Lane

City

Edgewater

State

MD

Zip Code

21037

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, BENEFITS

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

582.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2014

Transaction ID : SA11AI.47636

Amount of Each Receipt this Period

58.25

Full Name (Last, First, Middle Initial)

B. BRENDA S. WEAVER

Mailing Address 114 West Drive

City

Gallipolis

State

OH

Zip Code

45631

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/GALLIPOLIS CITY

Occupation

SECRETARY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

213.16

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2014

Transaction ID : SA11AI.49019

Amount of Each Receipt this Period

19.24

Full Name (Last, First, Middle Initial)

C. BRENDA S. WEAVER

Mailing Address 114 West Drive

City

Gallipolis

State

OH

Zip Code

45631

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/GALLIPOLIS CITY

Occupation

SECRETARY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

363.16

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.49020

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)..... ►

227.49

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 340 OF 403

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. BRENDA S. WEAVER

Mailing Address 114 West Drive

City	State	Zip Code
Gallipolis	OH	45631

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/GALLIPOLIS CITY

Occupation

SECRETARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

382.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	27	/	2014

Transaction ID : SA11AI.49021

Amount of Each Receipt this Period

19.24

Full Name (Last, First, Middle Initial)

B. BRENDA S. WEAVER

Mailing Address 114 West Drive

City	State	Zip Code
Gallipolis	OH	45631

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/GALLIPOLIS CITY

Occupation

SECRETARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	29	/	2014

Transaction ID : SA11AI.49022

Amount of Each Receipt this Period

19.24

Full Name (Last, First, Middle Initial)

C. JANA WEAVER

Mailing Address 451 London Road

City	State	Zip Code
Deerfield	WI	53531

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME WI CN 24

Occupation

ASSISTANT DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	02	/	2014

Transaction ID : SA11AI.48409

Amount of Each Receipt this Period

73.68

SUBTOTAL of Receipts This Page (optional)..... ▶

112.16

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:
(check only one)

PAGE 341 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>Full Name (Last, First, Middle Initial) A. KIMBERLY A. WEAVER</p> <p>Mailing Address 702 6th Avenue</p> <p>City Sheldon State IA Zip Code 51201</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME IA CN 61/STATE OF IA Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 208.00</p>		<p>Date of Receipt 05 / 14 / 2014 Transaction ID : SA11AI.47779 </p> <p>Amount of Each Receipt this Period 22.00</p>
<p>Full Name (Last, First, Middle Initial) B. BRENDA WEBB</p> <p>Mailing Address 4031 Executive Park Drive</p> <p>City Harrisburg State PA Zip Code 17111</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 225.86</p>		<p>Date of Receipt 05 / 12 / 2014 Transaction ID : SA11AI.48623 </p> <p>Amount of Each Receipt this Period 45.68</p>
<p>Full Name (Last, First, Middle Initial) C. BRIAN V. WEEKS</p> <p>Mailing Address 1522 A Street NE</p> <p>City Washington State DC Zip Code 20002</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation DIRECTOR, POLITICAL ACTION</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 602.91</p>		<p>Date of Receipt 05 / 15 / 2014 Transaction ID : SA11AI.47212 </p> <p>Amount of Each Receipt this Period 66.99</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		134.67
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 342 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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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 V. WEEKS

Mailing Address 1522 A Street NE

City

Washington

State

DC

Zip Code

20002

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

DIRECTOR, POLITICAL ACTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

669.90

Date of Receipt

05 / 27 / 2014

Transaction ID : SA11AI.47637

Amount of Each Receipt this Period

66.99

Full Name (Last, First, Middle Initial)

B. CINDY L. WEIBLE

Mailing Address 5849 Rambo Lane

City

Toledo

State

OH

Zip Code

43623

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/WASHINGTON LS

Occupation

CUSTODIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

05 / 29 / 2014

Transaction ID : SA11AI.49025

Amount of Each Receipt this Period

19.24

Full Name (Last, First, Middle Initial)

C. JOSEPH W. WEIDNER

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

AFSCME OH CN 8

Occupation

EDITOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.82

Date of Receipt

05 / 06 / 2014

Transaction ID : SA11AI.47846

Amount of Each Receipt this Period

65.66

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

151.89

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 343 OF 403

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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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 WEINSTEIN

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

AFSCME INT'L

Occupation

ASSISTANT TO THE PRESIDENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

699.39

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.47214

Amount of Each Receipt this Period

77.71

Full Name (Last, First, Middle Initial)

B. JESSICA WEINSTEIN

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

AFSCME INT'L

Occupation

ASSISTANT TO THE PRESIDENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

777.10

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.47639

Amount of Each Receipt this Period

77.71

Full Name (Last, First, Middle Initial)

C. SUSAN WELDON

Mailing Address 16 Fairfield Street

City

Harrisburg

State

PA

Zip Code

17109-4405

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13/NSP/LOCAL 521

Occupation

CONTROL ROOM OPERATOR II

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 12 / 2014

Transaction ID : SA11AI.47372

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

215.42

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 344 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>Full Name (Last, First, Middle Initial) A. CHRISTOPHER RYAN WELLES</p> <p>Mailing Address 300 Hardman Avenue South</p> <p>City State Zip Code South St. Paul MN 55075</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MN CN 5/CN14 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 270.04</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 06 / 2014 Transaction ID : SA11AI.48618</p> <p>Amount of Each Receipt this Period 56.08</p>
<p>Full Name (Last, First, Middle Initial) B. KELLY WELLS</p> <p>Mailing Address 4650 Beard Road</p> <p>City State Zip Code Sunbury OH 43074</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4 ACCOUNT CLERK</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 225.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.48075</p> <p>Amount of Each Receipt this Period 25.00</p>
<p>Full Name (Last, First, Middle Initial) C. KELLY WELLS</p> <p>Mailing Address 4650 Beard Road</p> <p>City State Zip Code Sunbury OH 43074</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4 ACCOUNT CLERK</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 265.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 20 / 2014 Transaction ID : SA11AI.49059</p> <p>Amount of Each Receipt this Period 40.00</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		121.08
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 345 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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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. KELLY WELLS

Mailing Address 4650 Beard Road

City State Zip Code
Sunbury OH 43074

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 4

Occupation
ACCOUNT CLERK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 20 / 2014

Transaction ID : SA11AI.49060

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. KELLY WELLS

Mailing Address 4650 Beard Road

City State Zip Code
Sunbury OH 43074

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 4

Occupation
ACCOUNT CLERK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.48127

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. KELLY WELLS

Mailing Address 4650 Beard Road

City State Zip Code
Sunbury OH 43074

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 4

Occupation
ACCOUNT CLERK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 29 / 2014

Transaction ID : SA11AI.48180

Amount of Each Receipt this Period

25.00

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 346 OF 403

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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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. ROSETTA WELLS

Mailing Address 5065 Hannan Trace Road

City State Zip Code
Patriot OH 45658

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

THERAPUTIC PROGRAM TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 02 / 2014

Transaction ID : SA11AI.48541

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. ROSETTA WELLS

Mailing Address 5065 Hannan Trace Road

City State Zip Code
Patriot OH 45658

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

THERAPUTIC PROGRAM TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 16 / 2014

Transaction ID : SA11AI.48561

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. ROSETTA WELLS

Mailing Address 5065 Hannan Trace Road

City State Zip Code
Patriot OH 45658

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

THERAPUTIC PROGRAM 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
05 / 30 / 2014

Transaction ID : SA11AI.48581

Amount of Each Receipt this Period

25.00

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 PageFOR LINE NUMBER: PAGE 347 OF 403
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. NICHOLE M. WENTZLAFF

Mailing Address 300 Hardman Avenue South

City	State	Zip Code
South St. Paul	MN	55075

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MN CN 5/CN14

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.82

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	06	/	2014

Transaction ID : SA11AI.48619

Amount of Each Receipt this Period

85.62

Full Name (Last, First, Middle Initial)

B. JOHN P. WESTMORELAND

Mailing Address 4678 West Road

City	State	Zip Code
Moose Lake	MN	55767

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MN CN 5/CN14

Occupation

BUSINESS AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	06	/	2014

Transaction ID : SA11AI.48620

Amount of Each Receipt this Period

76.96

Full Name (Last, First, Middle Initial)

C. JAMES RANDAL WESTON

Mailing Address 1495 Irvin - Shoots Road

City	State	Zip Code
Morril	OH	43337

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	12	/	2014

Transaction ID : SA11AI.48076

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional)..... ►

222.58

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:
(check only one)

PAGE 348 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>Full Name (Last, First, Middle Initial) A. JAMES RANDAL WESTON</p> <p>Mailing Address 1495 Irvin - Shoots Road</p> <p>City Morral State OH Zip Code 43337</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 580.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.49061</p> <p>Amount of Each Receipt this Period 40.00</p>	
<p>Full Name (Last, First, Middle Initial) B. JAMES RANDAL WESTON</p> <p>Mailing Address 1495 Irvin - Shoots Road</p> <p>City Morral State OH Zip Code 43337</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 640.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : SA11AI.48128</p> <p>Amount of Each Receipt this Period 60.00</p>	
<p>Full Name (Last, First, Middle Initial) C. JAMES RANDAL WESTON</p> <p>Mailing Address 1495 Irvin - Shoots Road</p> <p>City Morral State OH Zip Code 43337</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 700.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 29 / 2014 Transaction ID : SA11AI.48181</p> <p>Amount of Each Receipt this Period 60.00</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			160.00	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 349 OF 403

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>Full Name (Last, First, Middle Initial) A. SANDRA L. WHEELER</p> <p>Mailing Address W Hazel Avenue</p> <p>City State Zip Code Lima OH 45801</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4/LIMA CSD SECRETARY</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 251.64</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.49026</p> <p>Amount of Each Receipt this Period 38.48</p>	
<p>Full Name (Last, First, Middle Initial) B. DIANE WHITE-HARRIS</p> <p>Mailing Address 1142 Wolf Run Drive</p> <p>City State Zip Code Lansing MI 48917</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MI CN 25 EXECUTIVE SECRETARY</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 235.76</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 08 / 2014 Transaction ID : SA11AI.48215</p> <p>Amount of Each Receipt this Period 29.47</p>	
<p>Full Name (Last, First, Middle Initial) C. DIANE WHITE-HARRIS</p> <p>Mailing Address 1142 Wolf Run Drive</p> <p>City State Zip Code Lansing MI 48917</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MI CN 25 EXECUTIVE SECRETARY</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 265.23</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 21 / 2014 Transaction ID : SA11AI.48238</p> <p>Amount of Each Receipt this Period 29.47</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>97.42</p>	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER: PAGE 350 OF 403
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. BRYCE WICKSTROM

Mailing Address 1267 Matilda Street

City

St. Paul

State

MN

Zip Code

55117-4473

FEC ID number of contributing
federal political committee.

Name of Employer

AFSCME MN CN 5/STATE OF MN

Occupation

RECORDING SECRETARY

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
0	5			2	8			2	0	1	4		

Transaction ID : SA11AI.47881

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

B. ANN E. WIDGER
Mailing Address 1205 Morse Street NE
Unit 3

City

Washington

State

DC

Zip Code

20002

FEC ID number of contributing
federal political committee.

Name of Employer

AFSCME INT'L

Occupation

DIRECTOR, RETIREE PROGRAMS

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
0	5			1	5			2	0	1	4		

Transaction ID : SA11AI.47215

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. ANN E. WIDGER
Mailing Address 1205 Morse Street NE
Unit 3

City

Washington

State

DC

Zip Code

20002

FEC ID number of contributing
federal political committee.

Name of Employer

AFSCME INT'L

Occupation

DIRECTOR, RETIREE PROGRAMS

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
0	5			2	7			2	0	1	4		

Transaction ID : SA11AI.47640

Amount of Each Receipt this Period

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

FOR LINE NUMBER:
(check only one)

PAGE 351 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>Full Name (Last, First, Middle Initial) A. WILLIAM WILKINSON</p> <p>Mailing Address 5272 Bradgen Court</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Springfield</td> <td style="width: 33%;">State VA</td> <td style="width: 33%;">Zip Code 22151</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME INT'L</td> <td style="width: 66%;">Occupation ASSISTANT DIRECTOR, RESEARCH</td> </tr> </table> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p>			City Springfield	State VA	Zip Code 22151	Name of Employer AFSCME INT'L	Occupation ASSISTANT DIRECTOR, RESEARCH	<p>Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> M M / D D / Y Y Y Y Y Y </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 05 / 15 / 2014 </div> <p>Transaction ID : SA11AI.47216</p> <p>Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">53.71</div> </p> </p>
City Springfield	State VA	Zip Code 22151						
Name of Employer AFSCME INT'L	Occupation ASSISTANT DIRECTOR, RESEARCH							
<p>Full Name (Last, First, Middle Initial) B. WILLIAM WILKINSON</p> <p>Mailing Address 5272 Bradgen Court</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Springfield</td> <td style="width: 33%;">State VA</td> <td style="width: 33%;">Zip Code 22151</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME INT'L</td> <td style="width: 66%;">Occupation ASSISTANT DIRECTOR, RESEARCH</td> </tr> </table> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p>			City Springfield	State VA	Zip Code 22151	Name of Employer AFSCME INT'L	Occupation ASSISTANT DIRECTOR, RESEARCH	<p>Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> M M / D D / Y Y Y Y Y Y </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 05 / 27 / 2014 </div> <p>Transaction ID : SA11AI.47641</p> <p>Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">53.71</div> </p> </p>
City Springfield	State VA	Zip Code 22151						
Name of Employer AFSCME INT'L	Occupation ASSISTANT DIRECTOR, RESEARCH							
<p>Full Name (Last, First, Middle Initial) C. ANDREW WILLIAMS</p> <p>Mailing Address 4320 NW Second Avenue</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Des Moines</td> <td style="width: 33%;">State IA</td> <td style="width: 33%;">Zip Code 50313</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME IA CN 61</td> <td style="width: 66%;">Occupation STAFF REPRESENTATIVE</td> </tr> </table> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p>			City Des Moines	State IA	Zip Code 50313	Name of Employer AFSCME IA CN 61	Occupation STAFF REPRESENTATIVE	<p>Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> M M / D D / Y Y Y Y Y Y </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 05 / 08 / 2014 </div> <p>Transaction ID : SA11AI.48881</p> <p>Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">44.84</div> </p> </p>
City Des Moines	State IA	Zip Code 50313						
Name of Employer AFSCME IA CN 61	Occupation STAFF REPRESENTATIVE							
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<div style="border: 1px solid black; padding: 2px; text-align: right;">152.26</div>					
<p>TOTAL This Period (last page this line number only)..... ▶</p>			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>					

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 352 OF 403

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. STEVEN WILLIAMS

Mailing Address 18241 Icicle Road

City
SpartaState
WIZip Code
54656FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME WI CN 24

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.58

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	2		2	0	1	4

Transaction ID : SA11AI.48410

Amount of Each Receipt this Period

53.56

Full Name (Last, First, Middle Initial)

B. CHARLES H. WILLIAMSON

Mailing Address 162 South Street

City
MinfordState
OHZip Code
45653FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	2		2	0	1	4

Transaction ID : SA11AI.48542

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. CHARLES H. WILLIAMSON

Mailing Address 162 South Street

City
MinfordState
OHZip Code
45653FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	6		2	0	1	4

Transaction ID : SA11AI.48562

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

103.56

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 353 OF 403

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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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. CHARLES H. WILLIAMSON

Mailing Address 162 South Street

City	State	Zip Code
Minford	OH	45653

FEC ID number of contributing federal political committee.

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.48582

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

B. RANDALL J. WILSON

Mailing Address 16 1/2 Elm Street

City	State	Zip Code
Warren	PA	16365

FEC ID number of contributing federal political committee.

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.47356

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. RANDALL J. WILSON

Mailing Address 16 1/2 Elm Street

City	State	Zip Code
Warren	PA	16365

FEC ID number of contributing federal political committee.

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.48829

Amount of Each Receipt this Period

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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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 354 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>Full Name (Last, First, Middle Initial) A. SARAH C. WILSON</p> <p>Mailing Address 3609 Apollo Street, SE</p> <p>City Lacey State WA Zip Code 98503</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 221.50</p>			<p>Date of Receipt 05 / 09 / 2014 Transaction ID : SA11AI.48306 </p> <p>Amount of Each Receipt this Period 25.00 </p>	
<p>Full Name (Last, First, Middle Initial) B. SARAH C. WILSON</p> <p>Mailing Address 3609 Apollo Street, SE</p> <p>City Lacey State WA Zip Code 98503</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 246.50</p>			<p>Date of Receipt 05 / 23 / 2014 Transaction ID : SA11AI.48359 </p> <p>Amount of Each Receipt this Period 25.00 </p>	
<p>Full Name (Last, First, Middle Initial) C. BRUCE H. WITHAM</p> <p>Mailing Address 1329 S. 96th Street</p> <p>City Tacoma State WA Zip Code 98444</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 270.00</p>			<p>Date of Receipt 05 / 09 / 2014 Transaction ID : SA11AI.48307 </p> <p>Amount of Each Receipt this Period 30.00 </p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>80.00</p>	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 355 OF 403
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>Full Name (Last, First, Middle Initial) A. BRUCE H. WITHAM</p> <p>Mailing Address 1329 S. 96th Street</p> <p>City State Zip Code Tacoma WA 98444</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 300.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 23 / 2014 Transaction ID : SA11AI.48360</p> <p>Amount of Each Receipt this Period 30.00</p>	
<p>Full Name (Last, First, Middle Initial) B. KRISTIE WOLF-MALONEY</p> <p>Mailing Address 4923C Haverford Road</p> <p>City State Zip Code Harrisburg PA 17109</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME PA CN 13 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 498.30</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.47357</p> <p>Amount of Each Receipt this Period 99.66</p>	
<p>Full Name (Last, First, Middle Initial) C. ARTHUR WOOD</p> <p>Mailing Address 31062 Birchwood</p> <p>City State Zip Code Westland MI 48185</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MI CN 25 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 256.24</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 08 / 2014 Transaction ID : SA11AI.48216</p> <p>Amount of Each Receipt this Period 32.03</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>161.69</p>	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 356 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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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. ARTHUR WOOD

Mailing Address 31062 Birchwood

City

Westland

State

MI

Zip Code

48185

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.27

Date of Receipt

05 / 21 / 2014

Transaction ID : SA11AI.48239

Amount of Each Receipt this Period

32.03

Full Name (Last, First, Middle Initial)

B. SHELBY L. WOODALL

Mailing Address 1006 Ironwood Circle

City

Akron

State

OH

Zip Code

44312

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH CN 8

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.02

Date of Receipt

05 / 06 / 2014

Transaction ID : SA11AI.47849

Amount of Each Receipt this Period

64.48

Full Name (Last, First, Middle Initial)

C. PHELTON WOODS

Mailing Address 5435 York Lane S.

City

Columbus

State

OH

Zip Code

43232

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/COLUMBUS CITY

Occupation

LAB TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

05 / 01 / 2014

Transaction ID : SA11AI.47384

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

121.51

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 357 OF 403

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>Full Name (Last, First, Middle Initial) A. PHELTON WOODS</p> <p>Mailing Address 5435 York Lane S.</p> <p>City Columbus State OH Zip Code 43232</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation LAB TECH</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 250.00</p>			<p>Date of Receipt 05 / 12 / 2014 Transaction ID : SA11AI.47388 </p> <p>Amount of Each Receipt this Period 25.00 </p>	
<p>Full Name (Last, First, Middle Initial) B. PHELTON WOODS</p> <p>Mailing Address 5435 York Lane S.</p> <p>City Columbus State OH Zip Code 43232</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation LAB TECH</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 275.00</p>			<p>Date of Receipt 05 / 27 / 2014 Transaction ID : SA11AI.47436 </p> <p>Amount of Each Receipt this Period 25.00 </p>	
<p>Full Name (Last, First, Middle Initial) C. A DUFF WOODSIDE</p> <p>Mailing Address 5051 Sandman Drive Apt. 86</p> <p>City Taylor Mill State KY Zip Code 41015</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CUSTOMER SERVICE REP</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 210.24</p>			<p>Date of Receipt 05 / 02 / 2014 Transaction ID : SA11AI.48543 </p> <p>Amount of Each Receipt this Period 23.36 </p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			73.36	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 358 OF 403
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>Full Name (Last, First, Middle Initial) A. A DUFF WOODSIDE</p> <p>Mailing Address 5051 Sandman Drive Apt. 86</p> <p>City State Zip Code Taylor Mill KY 41015</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 11/STATE OF OH CUSTOMER SERVICE REP</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 233.60</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 16 / 2014</p> <p>Transaction ID : SA11AI.48563</p> <p>Amount of Each Receipt this Period 23.36</p>
<p>Full Name (Last, First, Middle Initial) B. A DUFF WOODSIDE</p> <p>Mailing Address 5051 Sandman Drive Apt. 86</p> <p>City State Zip Code Taylor Mill KY 41015</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 11/STATE OF OH CUSTOMER SERVICE REP</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 256.96</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 30 / 2014</p> <p>Transaction ID : SA11AI.48583</p> <p>Amount of Each Receipt this Period 23.36</p>
<p>Full Name (Last, First, Middle Initial) C. PETER WRIGHT</p> <p>Mailing Address 28 Washington Street</p> <p>City State Zip Code Marblehead MA 01945-0000</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MA CN 93 DIRECTOR POLITICAL ACTION & LEGIS.</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 370.70</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 08 / 2014</p> <p>Transaction ID : SA11AI.48506</p> <p>Amount of Each Receipt this Period 74.14</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		<p>120.86</p>
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 359 OF 403

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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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. STELLA WYMER

Mailing Address 7130 Yawberg Road

City State Zip Code
 Whitehouse OH 43571

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/SYLVANIA

Occupation

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
 05 / 29 / 2014

Transaction ID : SA11AI.49029

Amount of Each Receipt this Period

19.24

Full Name (Last, First, Middle Initial)

B. JEANETTE WYNN

Mailing Address 3064 Highland Oak Terrace

City State Zip Code
 Tallahassee FL 32301

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME FL CN 79

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

443.80

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 06 / 2014

Transaction ID : SA11AI.47890

Amount of Each Receipt this Period

77.56

Full Name (Last, First, Middle Initial)

C. JEANETTE WYNN

Mailing Address 3064 Highland Oak Terrace

City State Zip Code
 Tallahassee FL 32301

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME FL CN 79

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

457.80

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 27 / 2014

Transaction ID : SA11AI.48397

Amount of Each Receipt this Period

14.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.80

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 403
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 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. WAYNE J. YAMASAKI Full Name (Last, First, Middle Initial) 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 AFSCME HI LOC 152 Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 05 / 02 / 2014 Transaction ID : SA11AI.48005 Amount of Each Receipt this Period 50.00
B. CRYSTAL YINGER Full Name (Last, First, Middle Initial) Mailing Address 4031 Executive Park Drive City Harrisburg State PA Zip Code 17111 FEC ID number of contributing federal political committee. C Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 217.84		Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.47358 Amount of Each Receipt this Period 45.24
C. DON ZAVODNY Full Name (Last, First, Middle Initial) 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 AFSCME INT'L Occupation AREA FIELD SERVICES DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 425.97		Date of Receipt M M / D D / Y Y Y Y Y 05 / 15 / 2014 Transaction ID : SA11AI.47217 Amount of Each Receipt this Period 47.33
SUBTOTAL of Receipts This Page (optional)..... ▶		142.57
TOTAL This Period (last page this line number only)..... ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 361 OF 403

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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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. DON ZAVODNY

Mailing Address 9801 West O Street

City State Zip Code
 Lincoln NE 68528

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

473.30

Date of Receipt

05 / 27 / 2014

Transaction ID : SA11AI.47642

Amount of Each Receipt this Period

473.30

Full Name (Last, First, Middle Initial)

B. JANE ZIMMER

Mailing Address 1212 Jefferson Street SE

City State Zip Code
 Olympia WA 98501

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.50

Date of Receipt

05 / 09 / 2014

Transaction ID : SA11AI.48308

Amount of Each Receipt this Period

22.50

Full Name (Last, First, Middle Initial)

C. JANE ZIMMER

Mailing Address 1212 Jefferson Street SE

City State Zip Code
 Olympia WA 98501

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

05 / 23 / 2014

Transaction ID : SA11AI.48361

Amount of Each Receipt this Period

22.50

SUBTOTAL of Receipts This Page (optional)..... ►

92.33

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 362 OF 403

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>A. MATTHEW D. ZUVICH</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 720 Mox-Chehalis Road</p> <p>City McCleary State WA Zip Code 98557</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME WA CN 28 Occupation LOBBYIST</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 220.00</p>	<p>Date of Receipt 05 / 13 / 2014</p> <p>Transaction ID : SA11AI.48362</p> <p>Amount of Each Receipt this Period 40.00</p>
<p>B. MATTHEW D. ZUVICH</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 720 Mox-Chehalis Road</p> <p>City McCleary State WA Zip Code 98557</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME WA CN 28 Occupation LOBBYIST</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 225.00</p>	<p>Date of Receipt 05 / 19 / 2014</p> <p>Transaction ID : SA11AI.48363</p> <p>Amount of Each Receipt this Period 5.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ </p>	<p>Date of Receipt / / </p> <p>Amount of Each Receipt this Period </p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>	
<p>TOTAL This Period (last page this line number only)..... ▶</p>	

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 403

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. Full Name (Last, First, Middle Initial)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (DC37PEOPLE)

Mailing Address 125 Barclay Street

City State Zip Code
New York NY 10007

FEC ID number of contributing
federal political committee.

C C00149211

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262656.55

Date of Receipt

05 / **22** / **2014**

Transaction ID : SA12.47741

Amount of Each Receipt this Period

49766.71

Transfer

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

/ /

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

/ /

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

49766.71

TOTAL This Period (last page this line number only)..... ►

49766.71

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 364 OF 403

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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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

Mailing Address 11-15 Union Square West

City
New York

State Zip Code
NY 10003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3262.48

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 30 / 2014

Transaction ID : SA17.49079

Amount of Each Receipt this Period

716.59

Interest Income 5/30/2014

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

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

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

716.59

716.59

**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 365 OF 403

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address P.O. Box 53852

City	State	Zip Code
Phoenix	AZ	85072-3852

Purpose of Disbursement
Merchant Service Charges

001

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2014

Transaction ID : SB21B.47735

Amount of Each Disbursement this Period

1.60

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Mailing Address P.O. Box 53852

City	State	Zip Code
Phoenix	AZ	85072-3852

Purpose of Disbursement
Merchant Service Charges

001

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2014

Transaction ID : SB21B.47736

Amount of Each Disbursement this Period

0.44

Full Name (Last, First, Middle Initial)

C. BART GROUP

Mailing Address 171 Main Street

City	State	Zip Code
Port Washington	NY	11050

Purpose of Disbursement
Merchant Service Charges

001

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2014

Transaction ID : SB21B.47737

Amount of Each Disbursement this Period

88.64

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.68

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

84.02

239.44

139.85

463.31

553.99

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 367 OF 403

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

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
05		14		2014

Mailing Address 1625 L Street NW

City	State	Zip Code
Washington	DC	20036

Purpose 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:

Transaction ID : SB22.47732

Amount of Each Disbursement this Period

26900.00

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
05		15		2014

Mailing Address 1625 L Street NW

City	State	Zip Code
Washington	DC	20036

Purpose 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:

Transaction ID : SB22.47733

Amount of Each Disbursement this Period

64200.00

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
05		19		2014

Mailing Address 1625 L Street NW

City	State	Zip Code
Washington	DC	20036

Purpose 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:

Transaction ID : SB22.47734

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

92100.00

92100.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 368 OF 403

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. AIMEE BELGARD FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Mailing Address P.O. Box 35

Transaction ID : SB23.47656

City	State	Zip Code
Willingboro	NJ	08046

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution

011

Candidate Name

AIMEE BELGARDCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: NJ District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		27		2014

B. ANDRE CARSON FOR CONGRESSMailing Address 148 E. Market Street
Suite 300**Transaction ID : SB23.47692**

City	State	Zip Code
Indianapolis	IN	46204

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution

011

Candidate Name

ANDRE CARSONCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: IN District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		23		2014

C. BARBARA LEE FOR CONGRESSMailing Address 449 15th Street
#403**Transaction ID : SB23.47691**

City	State	Zip Code
Oakland	CA	94612

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution

011

Candidate Name

BARBARA LEECategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: CA District: 13

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7000.00

5000.00

1000.00

1000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 369 OF 403

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. BECERRA FOR CONGRESS

Mailing Address P.O. Box 261060

City	State	Zip Code
Los Angeles	CA	90026

Purpose of Disbursement
Contribution

Candidate Name

XAVIER BECERRAOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 34

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		22		2014

Transaction ID : SB23.47664

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. BETTY- PAC

Mailing Address P.O. Box 14141

City	State	Zip Code
Saint Paul	MN	55114

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

State: District: PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		27		2014

Transaction ID : SB23.47645

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. BOB BRADY FOR CONGRESS

Mailing Address 12518 Chilton Road

City	State	Zip Code
Philadelphia	PA	19154

Purpose of Disbursement
Contribution

Candidate Name

ROBERT A BRADYOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		06		2014

Transaction ID : SB23.47234

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5000.00

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**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 370 OF 403

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. BOCK FOR CONGRESS

Mailing Address P.O. Box 582

City	State	Zip Code
South Bend	IN	46624

Purpose of Disbursement
Contribution

Candidate Name

JOSEPH BOCKOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: IN District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2014

Transaction ID : SB23.47229

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. BONAMICI FOR CONGRESS

Mailing Address 2236 SE 10th Avenue

City	State	Zip Code
Portland	OR	97214

Purpose of Disbursement
Contribution

Candidate Name

SUZANNE BONAMICIOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: OR District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2014

Transaction ID : SB23.47220

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. BRIAN HIGGINS FOR CONGRESS

Mailing Address P.O. Box 28

City	State	Zip Code
Buffalo	NY	14220

Purpose of Disbursement
Contribution

Candidate Name

BRIAN HIGGINSOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 26

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2014

Transaction ID : SB23.47713

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

9500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 371 OF 403

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. BUTTERFIELD FOR CONGRESS

Mailing Address P.O. Box 2571

City	State	Zip Code
Wilson	NC	27894

Purpose of Disbursement
Contribution

Candidate Name

G K BUTTERFIELDOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: NC District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2014

Transaction ID : SB23.47693

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. CARDIN FOR SENATE

Mailing Address P.O. Box 21093

City	State	Zip Code
Catonsville	MD	21228

Purpose of Disbursement
Contribution

Candidate Name

BENJAMIN L CARDINOffice Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: MD District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2014

Transaction ID : SB23.47643

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. CEDRIC RICHMOND FOR CONGRESS

Mailing Address 1631 Elysian Fields Avenue

City	State	Zip Code
New Orleans	LA	70117

Purpose of Disbursement
Contribution

Candidate Name

CEDRIC L. RICHMONDOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

State: LA District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2014

Transaction ID : SB23.47714

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00

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**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 372 OF 403

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. CHC/BOLD PAC

Mailing Address 1831 Bay Street SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		27		2014

Transaction ID : SB23.47651

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. CITIZENS FOR ELEANOR HOLMES NORTON

Mailing Address P.O. Box 70626

City	State	Zip Code
Washington	DC	20024

Purpose of Disbursement
Contribution

Candidate Name

ELEANOR HOLMES NORTON

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: DC District: 00

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		27		2014

Transaction ID : SB23.47694

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. COLORADO DEMOCRATIC PARTY

Mailing Address 777 Santa Fe Drive

City	State	Zip Code
Denver	CO	80204

Purpose of Disbursement
Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		15		2014

Transaction ID : SB23.47366

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7000.00

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**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 373 OF 403

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. COMMITTEE FOR A LIVABLE FUTUREMailing Address 830 NE Holladay Street
Room 105

City Portland State OR Zip Code 97232

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) ▼ PAC

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		06		2014

Transaction ID : SB23.47363

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. COMMITTEE TO ELECT ALAN GRAYSON

Mailing Address 8419 Oak Park Road

City Orlando State FL Zip Code 32819

Purpose of Disbursement
Contribution

Candidate Name

ALAN MARK GRAYSONOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: FL District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		27		2014

Transaction ID : SB23.47695

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. COMMITTEE TO ELECT MARTHA ROBERTSON

Mailing Address P.O. Box 54

City Dryden State NY Zip Code 13053

Purpose of Disbursement
Contribution

Candidate Name

MARTHA ROBERTSONOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: NY District: 23

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		06		2014

Transaction ID : SB23.47219

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8500.00

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**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 374 OF 403

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. CONGRESSIONAL BLACK CAUCUS - PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		15		2014

Mailing Address 1831 Bay Street SE

Transaction ID : SB23.47367

City	State	Zip Code
Washington	DC	20003

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution

011

Candidate Name

Category/
Type

5000.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

State: District: PAC

Full Name (Last, First, Middle Initial)

B. CT WORKING FAMILIES FEDERAL PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2014

Mailing Address 30 Arbor Street
Suite 210**Transaction ID : SB23.47653**

City	State	Zip Code
Hartford	CT	06106

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution

011

Candidate Name

Category/
Type

5000.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

State: District: PAC

Full Name (Last, First, Middle Initial)

C. CUMMINGS FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2014

Mailing Address 2901 Druid Park Drive
Suite 203**Transaction ID : SB23.47715**

City	State	Zip Code
Baltimore	MD	21215

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution

011

Candidate Name

Category/
Type

1000.00

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: MD District: 07

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

11000.00

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**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 375 OF 403

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. DAVID PRICE FOR CONGRESS COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		27		2014

Mailing Address P.O. Box 1986

City	State	Zip Code
Raleigh	NC	27602

Transaction ID : SB23.47696Purpose of Disbursement
Contribution

011

Amount of Each Disbursement this Period

Candidate Name

DAVID EUGENE PRICECategory/
Type

1000.00

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: NC District: 04

Full Name (Last, First, Middle Initial)

B. DEBBIE DINGELL FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		12		2014

Mailing Address P.O. Box 746

City	State	Zip Code
Dearborn	MI	48121

Transaction ID : SB23.47240Purpose of Disbursement
Contribution-void check from prior report

011

Amount of Each Disbursement this Period

Candidate Name

DEBBIE DINGELLCategory/
Type

-5000.00

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 12

Full Name (Last, First, Middle Initial)

C. DEBBIE DINGELL FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		12		2014

Mailing Address P.O. Box 746

City	State	Zip Code
Dearborn	MI	48121

Transaction ID : SB23.47241Purpose of Disbursement
Contribution

011

Amount of Each Disbursement this Period

Candidate Name

DEBBIE DINGELLCategory/
Type

5000.00

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 12

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1000.00
-5000.00
5000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 376 OF 403

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. DEBBIE WASSERMAN SCHULTZ FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		22		2014

Mailing Address 1071 Twin Branch Lane

Transaction ID : SB23.47662

City	State	Zip Code
Weston	FL	33326

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution-void check from prior report

011

-1000.00

Candidate Name

DEBBIE WASSERMAN SCHULTZCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 23

Full Name (Last, First, Middle Initial)

B. DEBBIE WASSERMAN SCHULTZ FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		22		2014

Mailing Address 1071 Twin Branch Lane

Transaction ID : SB23.47663

City	State	Zip Code
Weston	FL	33326

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution-void check from prior report

011

-5000.00

Candidate Name

DEBBIE WASSERMAN SCHULTZCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: FL District: 23

Full Name (Last, First, Middle Initial)

C. DEFAZIO FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		06		2014

Mailing Address P.O. Box 1316

Transaction ID : SB23.47232

City	State	Zip Code
Springfield	OR	97477

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution

011

1000.00

Candidate Name

PETER A. DEFAZIOCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: OR District: 04

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
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 377 OF 403

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. DIANA DEGETTE FOR US CONGRESS

Mailing Address P.O. Box 61337

City	State	Zip Code
Denver	CO	80206

Purpose of Disbursement
Contribution

Candidate Name

DIANA L DEGETTEOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: CO District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		27		2014

Transaction ID : SB23.47716

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. DONALD NORCROSS FOR CONGRESS

Mailing Address P.O. Box 160

City	State	Zip Code
Collingswood	NJ	08108

Purpose of Disbursement
Contribution

Candidate Name

DONALD W NORCROSSOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: NJ District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SB23.47659

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. DOYLE FOR CONGRESS COMMITTEE

Mailing Address P.O. Box 17426

City	State	Zip Code
Pittsburgh	PA	15235

Purpose of Disbursement
Contribution

Candidate Name

MIKE DOYLEOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 14

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		06		2014

Transaction ID : SB23.47235

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

8000.00

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**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 378 OF 403

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. DOYLE FOR CONGRESS COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	27	/	2014

Mailing Address P.O. Box 17426

City	State	Zip Code
Pittsburgh	PA	15235

Transaction ID : SB23.47697Purpose of Disbursement
Contribution

011

Amount of Each Disbursement this Period

Candidate Name

MIKE DOYLECategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: PA District: 14

Amount of Each Disbursement this Period
1000.00

Full Name (Last, First, Middle Initial)

B. DUTCH PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	27	/	2014

Mailing Address 499 S. Capitol Street SW
Suite 404

City	State	Zip Code
Washington	DC	20003

Transaction ID : SB23.47649Purpose of Disbursement
Contribution

011

Amount of Each Disbursement this Period

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼

State: District: PAC

Amount of Each Disbursement this Period
1500.00

Full Name (Last, First, Middle Initial)

C. DUTCH RUPPERSBERGER FOR CONGRESS COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	27	/	2014

Mailing Address 22 West Padonia Road
Suite C-141

City	State	Zip Code
Timonium	MD	21093

Transaction ID : SB23.47717Purpose of Disbursement
Contribution

011

Amount of Each Disbursement this Period

Candidate Name

DUTCH RUPPERSBERGERCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: MD District: 02

Amount of Each Disbursement this Period
2000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 379 OF 403

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. EDDIE BERNICE JOHNSON FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2014

Mailing Address 3102 Maple Avenue
Suite 605

City Dallas State TX Zip Code 75201

Purpose of Disbursement
Contribution

011

Transaction ID : SB23.47698

Amount of Each Disbursement this Period

1000.00

Candidate Name

EDDIE BERNICE JOHNSONCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: TX District: 30

Full Name (Last, First, Middle Initial)

B. ENGEL FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2014

Mailing Address 462 California Road

City Bronxville State NY Zip Code 10708

Purpose of Disbursement
Contribution

011

Transaction ID : SB23.47718

Amount of Each Disbursement this Period

1000.00

Candidate Name

ELIOT L ENGELCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 16

Full Name (Last, First, Middle Initial)

C. FREDERICA S. WILSON FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		05		2014

Mailing Address 19821 NW 2nd Avenue
Box 354

City Miami Gardens State FL Zip Code 33169

Purpose of Disbursement
Contribution

011

Transaction ID : SB23.47218

Amount of Each Disbursement this Period

2000.00

Candidate Name

FREDERICA S. WILSONCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 24

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4000.00

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**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 380 OF 403

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. FRIENDS FOR GREGORY MEEKS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2014

Mailing Address 153-01 Jamaica Avenue
Suite 535City State Zip Code
Jamaica NY 11432Purpose of Disbursement
Contribution

011

Transaction ID : SB23.47699

Amount of Each Disbursement this Period

500.00

Candidate Name

GREGORY W MEEKSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: NY District: 05

Full Name (Last, First, Middle Initial)

B. FRIENDS FOR GREGORY MEEKS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2014

Mailing Address 153-01 Jamaica Avenue
Suite 535City State Zip Code
Jamaica NY 11432Purpose of Disbursement
Contribution

011

Transaction ID : SB23.47719

Amount of Each Disbursement this Period

500.00

Candidate Name

GREGORY W MEEKSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 05

Full Name (Last, First, Middle Initial)

C. FRIENDS FOR HARRY REID

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2014

Mailing Address 426 C Street NE

City State Zip Code
Washington DC 20002Purpose of Disbursement
Contribution

011

Transaction ID : SB23.47644

Amount of Each Disbursement this Period

1000.00

Candidate Name

HARRY REIDCategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: NV District: 00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 381 OF 403

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. FRIENDS OF BENNIE THOMPSONMailing Address 236 Massachusetts Avenue NE
Suite 603

City Washington State DC Zip Code 20002

Purpose of Disbursement
Contribution

Candidate Name

BENNIE G. THOMPSONOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: MS District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		22		2014

Transaction ID : SB23.47665

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF FARR

Mailing Address P.O. Box 122

City Monterey State CA Zip Code 93942

Purpose of Disbursement
Contribution

Candidate Name

SAM FARROffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 20

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		22		2014

Transaction ID : SB23.47676

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF MICHELLE GRISHAM

Mailing Address P.O. Box 439703

City Albuquerque State NM Zip Code 87125

Purpose of Disbursement
Contribution

Candidate Name

MICHELLE GRISHAMOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: NM District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		22		2014

Transaction ID : SB23.47667

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3000.00

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**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 382 OF 403

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. FRIENDS OF RENTERIA

Mailing Address 3701 Porter Street NW

City	State	Zip Code
Washington	DC	20016

Purpose of Disbursement
Contribution

011

Candidate Name

AMANDA RENTERIACategory/
Type
 Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 21

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2014

Transaction ID : SB23.47720

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. GRACE FOR NEW YORK

Mailing Address 49-04 43rd Avenue

City	State	Zip Code
Woodside	NY	11377

Purpose of Disbursement
Contribution

011

Candidate Name

GRACE MENGCategory/
Type
 Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2014

Transaction ID : SB23.47723

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. GRAHAM FOR CONGRESS

Mailing Address P.O. Box 310

City	State	Zip Code
Tallahassee	FL	32302

Purpose of Disbursement
Contribution

011

Candidate Name

GWEN GRAHAMCategory/
Type
 Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: FL District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2014

Transaction ID : SB23.47221

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6000.00

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	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. HASTINGS FOR CONGRESS

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB23.47724

011

Amount of Each Disbursement this Period

Category/
Type

1000.00

☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 20

B. HUFFMAN FOR CONGRESS

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB23.47669

011

Amount of Each Disbursement this Period

Category/
Type

5000.00

☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 02

C. ISRAEL FOR CONGRESS

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB23.47700

011

Amount of Each Disbursement this Period

Category/
Type

2500.00

Primary ☒ General ☐
Other (specify) ▼

State: NY District: 03

SUBTOTAL of Disbursements This Page (optional).....

8500.00

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 384 OF 403

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. JACKIE FOR CONGRESS

Mailing Address P.O. Box 112

City	State	Zip Code
Burlingame	CA	94011

Purpose of Disbursement
Contribution

011

Candidate Name

JACKIE SPEIERCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 14

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	22	/	2014

Transaction ID : SB23.47677

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. JAMES LEE WITT FOR CONGRESS

Mailing Address P.O. Box 36

City	State	Zip Code
Dardanelle	AR	72834

Purpose of Disbursement
Contribution

011

Candidate Name

JAMES LEE WITTCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: AR District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	15	/	2014

Transaction ID : SB23.47245

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. JIM COSTA FOR CONGRESSMailing Address 2037 West Bullard
Suite 355

City	State	Zip Code
Fresno	CA	93711

Purpose of Disbursement
Contribution

011

Candidate Name

JIM MR. COSTACategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 16

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	22	/	2014

Transaction ID : SB23.47670

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5500.00

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**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 385 OF 403

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. JOHN LEWIS FOR CONGRESS

Mailing Address P.O. Box 2323

City Atlanta	State GA	Zip Code 30301
-----------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

JOHN R. LEWISOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: GA District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		27		2014

Transaction ID : SB23.47701

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. JUDY CHU FOR CONGRESSMailing Address 6380 Wilshire Blvd.
#1612

City Los Angeles	State CA	Zip Code 90048
---------------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

JUDY CHUOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 27

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		22		2014

Transaction ID : SB23.47678

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. KAPTUR FOR CONGRESS

Mailing Address P.O. Box 899

City Toledo	State OH	Zip Code 43697
----------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

MARCY C HON. KAPTUROffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		27		2014

Transaction ID : SB23.47702

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4500.00

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**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 386 OF 403

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. KAREN BASS FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		22		2014

Mailing Address 777 S. Figueroa Street
Suite 4060

City Los Angeles State CA Zip Code 90017

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

KAREN BASSOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 37

Transaction ID : SB23.47679

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. KIND FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		27		2014

Mailing Address 205 5th Avenue South

City La Crosse State WI Zip Code 54601

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

RONALD JAMES KINDOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

State: WI District: 03

Transaction ID : SB23.47725

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. KURT SCHRADER FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		06		2014

Mailing Address P.O. Box 3314

City Oregon City State OR Zip Code 97045

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

KURT SCHRADEROffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: OR District: 05

Transaction ID : SB23.47222

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4500.00

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**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 387 OF 403

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. KUSTER FOR CONGRESS

Mailing Address P.O. Box 1498

City	State	Zip Code
Concord	NH	03302

Purpose of Disbursement
Contribution

011

Candidate Name

ANN MCLANE KUSTERCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: NH District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	15	/	2014

Transaction ID : SB23.47223

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. KYRSTEN SINEMA FOR CONGRESS

Mailing Address P.O. Box 25879

City	State	Zip Code
Tempe	AZ	85285

Purpose of Disbursement
Contribution

011

Candidate Name

KYRSTEN SINEMACategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: AZ District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	27	/	2014

Transaction ID : SB23.47703

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. LANGEVIN FOR CONGRESS

Mailing Address 181- A Knight Street

City	State	Zip Code
Warwick	RI	02886

Purpose of Disbursement
Contribution

011

Candidate Name

JAMES R LANGEVINCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: RI District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	27	/	2014

Transaction ID : SB23.47726

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

9500.00

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<input type="checkbox"/>	21b	<input type="checkbox"/>	22	<input checked="" type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. LARA FOR NEW MEXICO

Three examples of the 3x3 grid pattern are shown, separated by slashes. The first grid contains the number '05' with 'M' in the top-left and top-right cells. The second grid contains the number '06' with 'D' in the top-left and top-right cells. The third grid contains the year '2014' with 'Y' in the top-left, top-middle, top-right, and middle-right cells.

ROXANNE LARA

State: NM District: 02

B. LARSON FOR CONGRESS

JOHN B LARSON

State: CT District: 01

C. LEVEL THE PLAYING FIELD PAC

05 / 27 / 2014

State: District:

7500.00

FEC Schedule B (Form 3X) Rev. 02/2003

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 389 OF 403

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. LEVIN FOR CONGRESS

Mailing Address P.O. Box 37

City	State	Zip Code
Roseville	MI	48066

Purpose of Disbursement
Contribution

011

Candidate Name

SANDER M MR LEVINCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2014

Transaction ID : SB23.47228

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

B. LOFGREN FOR CONGRESS

Mailing Address P.O. Box 913

City	State	Zip Code
San Jose	CA	95108

Purpose of Disbursement
Contribution

011

Candidate Name

ZOE LOFGRENCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 19

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	22	/	2014

Transaction ID : SB23.47680

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. LOUISE SLAUGHTER RE-ELECTION COMMITTEE

Mailing Address P.O. Box 730

City	State	Zip Code
Honeoye	NY	14471

Purpose of Disbursement
Contribution

011

Candidate Name

LOUISE M SLAUGHTERCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: NY District: 25

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	27	/	2014

Transaction ID : SB23.47705

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6000.00

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**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 390 OF 403

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. M-PAC

Mailing Address 712 35th Avenue

City	State	Zip Code
Seattle	WA	98122

Purpose of Disbursement
Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2014

Transaction ID : SB23.47362

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. MADISON PACMailing Address 235 State Street
#206

City	State	Zip Code
Springfield	MA	01103

Purpose of Disbursement
Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2014

Transaction ID : SB23.47646

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. MALONEY FOR CONGRESSMailing Address 24 E. 93rd Street
Suite 1B

City	State	Zip Code
New York	NY	10128

Purpose of Disbursement
Contribution

Candidate Name

CAROLYN B MALONEY

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: NY District: 12

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2014

Transaction ID : SB23.47233

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10000.00

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**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 391 OF 403

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. MARCIA L. FUDGE FOR CONGRESS COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		27		2014

Mailing Address 23811 Chagrin Blvd.
Suite LL55

City Beachwood State OH Zip Code 44122

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

MARCIA L FUDGEOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 11

Transaction ID : SB23.47706

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. MARK POCAN FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		19		2014

Mailing Address 309 N Baldwin Street

City Madison State WI Zip Code 53703

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

MARK POCANOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: WI District: 02

Transaction ID : SB23.47224

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. MATSUI FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		22		2014

Mailing Address 236 Massachusetts Avenue NE
#603

City Washington State DC Zip Code 20002

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

DORIS MATSUIOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 06

Transaction ID : SB23.47671

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00

--

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 392 OF 403

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. MICHIGAN DEMOCRATIC PARTY

Mailing Address 606 Townsend Street

City	State	Zip Code
Lansing	MI	48933

Purpose of Disbursement
Contribution-void check from prior report

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	PAC

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		01		2014

Transaction ID : SB23.47360

Amount of Each Disbursement this Period

-5000.00

Full Name (Last, First, Middle Initial)

B. MICHIGAN DEMOCRATIC PARTY

Mailing Address 606 Townsend Street

City	State	Zip Code
Lansing	MI	48933

Purpose of Disbursement
Contribution

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	PAC

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		05		2014

Transaction ID : SB23.47361

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. MIKE THOMPSON FOR CONGRESSMailing Address 236 Massachusetts Avenue NE
Suite 603

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement
Contribution

Candidate Name

MIKE MR. THOMPSONOffice Sought:

<input checked="" type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: CA District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		22		2014

Transaction ID : SB23.47681

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1000.00

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	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MOORE FOR CONGRESS

MM / DD / YYYY

011

GWENDOLYNNE MOORE

Category/
Type

Disbursement For: 2014

☐ Primary ☒ General

☐ Other (specify) ▼

1000.00

B. NAPOLITANO FOR CONGRESS

MM / DD / YYYY

011

GRACE NAPOLITANO

Category/
Type

Disbursement For: 2014

☒ Primary ☐ General

☐ Other (specify) ▼

1000.00

C. NATALIE TENNANT FOR SENATE

05 / 19 / 2014

011

Amount of Each Disbursement this Period

NATALIE TENNANT

Category/
Type

Disbursement For: 2014

☐ Primary ☒ General

☐ Other (specify) ▼

5000.00

7000.00

The diagram shows a rectangular frame with 12 vertical members and 2 horizontal members. A cross-section of a member is shown, indicating a rectangular shape with a central void.

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. NEW MILLENIUM PAC

MM / DD / YYYY

011

Category/
Type

State: District:

2500.00

B. NEW YORK JOBS PAC

MM / DD / YYYY

011

Category/
Type

State: District:

2500.00

C. NICK CASEY FOR CONGRESS

05 / 19 / 2014

011

GEORGE NICHOLAS JR CASEY

Category/
Type

State: WV District: 02

5000.00

10000.00

[illegible]

**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 395 OF 403

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. PALLONE FOR CONGRESS

Mailing Address P.O. Box 3176

City	State	Zip Code
Long Branch	NJ	07740

Purpose of Disbursement
Contribution

Candidate Name

FRANK JR PALLONE

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: NJ District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		22		2014

Transaction ID : SB23.47672

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. PASCRELL FOR CONGRESS

Mailing Address P.O. Box 640

City	State	Zip Code
Totowa	NJ	07511

Purpose of Disbursement
Contribution

Candidate Name

WILLIAM J JR PASCRELL

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: NJ District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		22		2014

Transaction ID : SB23.47683

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. PATRICK HENRY HAYS FOR CONGRESS

Mailing Address P.O. Box 94886

City	State	Zip Code
North Little Rock	AR	72190

Purpose of Disbursement
Contribution

Candidate Name

PATRICK HENRY HAYS

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: AR District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		15		2014

Transaction ID : SB23.47242

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 397 OF 403

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. PEOPLE FOR PATTY MURRAY

Mailing Address P.O. Box 3662

City Seattle	State WA	Zip Code 98124
-----------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

PATTY MURRAYOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: WA District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		06		2014

Transaction ID : SB23.47369

Amount of Each Disbursement this Period

750.00

Full Name (Last, First, Middle Initial)

B. PERLMUTTER FOR CONGRESSMailing Address 3440 Youngfield Street
#264

City Wheat Ridge	State CO	Zip Code 80033
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Purpose of Disbursement
Contribution

Candidate Name

EDWIN G PERLMUTTEROffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: CO District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		27		2014

Transaction ID : SB23.47708

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. QUIGLEY FOR CONGRESS

Mailing Address P.O. Box 13040

City Chicago	State IL	Zip Code 60613
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Purpose of Disbursement
Contribution

Candidate Name

MIKE QUIGLEYOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		27		2014

Transaction ID : SB23.47709

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3750.00

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**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 398 OF 403

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. SANFORD BISHOP FOR CONGRESS

Mailing Address P.O. Box 909

City	State	Zip Code
Columbus	GA	31902

Purpose of Disbursement
Contribution

011

Candidate Name

SANFORD D JR BISHOPCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: GA District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2014

Transaction ID : SB23.47237

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. SANFORD BISHOP FOR CONGRESS

Mailing Address P.O. Box 909

City	State	Zip Code
Columbus	GA	31902

Purpose of Disbursement
Contribution

011

Candidate Name

SANFORD D JR BISHOPCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: GA District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2014

Transaction ID : SB23.47710

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. SCHIFF FOR CONGRESSMailing Address 777 S. Figueroa Street
Suite 4050

City	State	Zip Code
Los Angeles	CA	90017

Purpose of Disbursement
Contribution

011

Candidate Name

ADAM SCHIFFCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 28

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2014

Transaction ID : SB23.47689

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5000.00

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**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 399 OF 403

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. SCOTT FOR CONGRESS

Mailing Address P.O. Box 251

City	State	Zip Code
Newport News	VA	23607

Purpose of Disbursement
Contribution

Candidate Name

ROBERT C. SCOTTOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

State: VA District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	27	/	2014

Transaction ID : SB23.47727

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. SCOTT PETERS FOR CONGRESSMailing Address 330 Encinitas Blvd.
Suite 101

City	State	Zip Code
Encinitas	CA	92024

Purpose of Disbursement
Contribution

Candidate Name

SCOTT PETERSOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 52

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	22	/	2014

Transaction ID : SB23.47673

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. SHERMAN FOR CONGRESSMailing Address 777 S. Figueroa Street
Suite 4050

City	State	Zip Code
Los Angeles	CA	90017

Purpose of Disbursement
Contribution

Candidate Name

BRAD SHERMANOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 30

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	22	/	2014

Transaction ID : SB23.47674

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

10000.00

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**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 400 OF 403

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. SWALWELL FOR CONGRESS

Mailing Address P.O. Box 2847

City	State	Zip Code
Dublin	CA	94568

Purpose of Disbursement
Contribution

011

Candidate Name

ERIC MICHAEL SWALWELLCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 15

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		22		2014

Transaction ID : SB23.47675

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. THE COMMITTEE TO RE-ELECT CONGRESSMAN HANK JOHNSONMailing Address 4153 Flat Shoals Parkway
Suite E 322, Building C, 2nd Fl.

City	State	Zip Code
Decatur	GA	30034

Purpose of Disbursement
Contribution

011

Candidate Name

HENRY C 'HANK' JR JOHNSONCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: GA District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		06		2014

Transaction ID : SB23.47239

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. THE COMMITTEE TO RE-ELECT CONGRESSMAN HANK JOHNSONMailing Address 4153 Flat Shoals Parkway
Suite E 322, Building C, 2nd Fl.

City	State	Zip Code
Decatur	GA	30034

Purpose of Disbursement
Contribution

011

Candidate Name

HENRY C 'HANK' JR JOHNSONCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: GA District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		27		2014

Transaction ID : SB23.47711

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3000.00

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**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 401 OF 403

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. TIM WALZ FOR US CONGRESS

Mailing Address P.O. Box 938

City	State	Zip Code
Mankato	MN	56002

Purpose of Disbursement
Contribution

Candidate Name

TIMOTHY J. WALZOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: MN District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		27		2014

Transaction ID : SB23.47712

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. TITUS FOR CONGRESSMailing Address 1210 S. Valley View Road, #114
P.O. Box 72454

City	State	Zip Code
Las Vegas	NV	89170

Purpose of Disbursement
Contribution

Candidate Name

DINA TITUSOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: NV District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		27		2014

Transaction ID : SB23.47728

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

C. TONY CARDENAS FOR CONGRESSMailing Address 3700 Wilshire Blvd.
Suite 1050-B

City	State	Zip Code
Los Angeles	CA	90010

Purpose of Disbursement
Contribution

Candidate Name

TONY CARDENASOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 29

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		22		2014

Transaction ID : SB23.47690

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5000.00

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**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 402 OF 403

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. TRIVEDI FOR CONGRESS

Mailing Address 959 Firetower Road

City	State	Zip Code
Birdsboro	PA	19508

Purpose of Disbursement
Contribution

011

Candidate Name

MANAN TRIVEDICategory/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: PA District: 06

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	06	/	2014

Transaction ID : SB23.47236

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. VOTEVETS

Mailing Address P.O. Box 10031

City	State	Zip Code
Portland	OR	97296

Purpose of Disbursement
Contribution

011

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼ PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	15	/	2014

Transaction ID : SB23.47365

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. WYDEN FOR SENATE

Mailing Address P.O. Box 3498

City	State	Zip Code
Portland	OR	97208

Purpose of Disbursement
Contribution

011

Candidate Name

RONALD L WYDENCategory/
Type

Office Sought: ☐ House
☒ Senate
☐ President

State: OR District: 00

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	06	/	2014

Transaction ID : SB23.47368

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8500.00

200250.00

	21b		22		23		24		25		26
	27		28a		28b		28c		X 29		30b

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JOHN F. TIERNEY LEGAL EXPENSE TRUST

012

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period

2000.00

B.

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

C.

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

2000.00

2000.00