

# **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)

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

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NAME OF COMMITTEE (In Full)

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

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

**A. CLEVENGER-MURPHY, STEPHANIE, K., ,**

Mailing Address 3230 Rogstad Bend

City

Canal Winchester

State

OH

Zip Code

43110

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

INTERNAL AUDITOR II

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.00

Date of Receipt

09 / 13 / 2019

Transaction ID : SA11AI.236224

Amount of Each Receipt this Period

18.00

☐ Memo Item

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

**B. CLEVENGER-MURPHY, STEPHANIE, K., ,**

Mailing Address 3230 Rogstad Bend

City

Canal Winchester

State

OH

Zip Code

43110

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

INTERNAL AUDITOR II

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

09 / 27 / 2019

Transaction ID : SA11AI.236449

Amount of Each Receipt this Period

18.00

☐ Memo Item

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

**C. CLONTZ, SHANE, R., ,**

Mailing Address 3025 Shadwofax Drive

City

Springfield

State

IL

Zip Code

62707

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)

INFORMATION SYSTEMS ANALYST

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

226.80

Date of Receipt

09 / 03 / 2019

Transaction ID : SA11AI.235123

Amount of Each Receipt this Period

25.20

☐ Memo Item

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

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

61.20