

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

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

FOR LINE NUMBER: PAGE 294 OF 752

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

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

A. HOMAN, DANNY, J., ,

Mailing Address 4320 NW Second Avenue

City

Des Moines

State

IA

Zip Code

50313

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IA CN 61

Occupation (for Individual)

PRESIDENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1460.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 09 / 2019

Transaction ID : SA11AI.236814

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. HOMAN, DANNY, J., ,

Mailing Address 4320 NW Second Avenue

City

Des Moines

State

IA

Zip Code

50313

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IA CN 61

Occupation (for Individual)

PRESIDENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1530.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 30 / 2019

Transaction ID : SA11AI.234309

Amount of Each Receipt this Period

70.00

☐ Memo Item

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

C. HOMER, WILLIAM, F., ,

Mailing Address 500 N Lexington-Springmill Road
#50

City

Ontario

State

OH

Zip Code

44906

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

CORRECTION OFFICER

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

294.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 13 / 2019

Transaction ID : SA11AI.236272

Amount of Each Receipt this Period

15.50

☐ Memo Item

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

185.50

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