

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

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

FOR LINE NUMBER: PAGE 655 OF 752

(check only one)

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

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

NAME OF COMMITTEE (In Full)

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

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

A. **WATSON, TIMOTHY, , ,**

Mailing Address 10723 Kilburn Lane

City

Cambridge

State

OH

Zip Code

43725

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11

Occupation (for Individual)

THERAPUTIC PROGRAM CORDINATO

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

323.00

Date of Receipt

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

Transaction ID : SA11AI.236643

Amount of Each Receipt this Period

34.00

☐ Memo Item

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

B. **WATTLE, JO, , ,**

Mailing Address 1850 Quaker Street

City

Eureka

State

CA

Zip Code

95501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME CA CN 57/LOCAL 1684

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2019

Transaction ID : SA11AI.236978

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. **WATTS, MIA, D., ,**

Mailing Address 17122 Fairway View Lane

City

Upper Marlboro

State

MD

Zip Code

20772

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

STAFF ACCOUNTANT I

Receipt For:

☐
☐

Primary

General

Other (specify)

Aggregate Year-to-Date ▼

565.50

Date of Receipt

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

Transaction ID : SA11AI.234661

Amount of Each Receipt this Period

33.63

☐ Memo Item

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

97.63

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