

# **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 370

(check only one)

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

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NAME OF COMMITTEE (In Full)

UNITED FOOD AND COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

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

A. JONES, KATHLEEN, , ,

Mailing Address POST OFFICE BOX 23555

City  
TIGARDState  
ORZip Code  
97281-3555FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UFCW Local No. 75Occupation (for Individual)  
L/U 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  
 11 / 19 / 2019

Transaction ID : 17204597

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. KELLY SR., JAMES, , ,

Mailing Address 7250 Poe Avenue  
Suite 400City  
DaytonState  
OHZip Code  
45414-2698FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UFCW Local No. 75Occupation (for Individual)  
L/U 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  
 11 / 19 / 2019

Transaction ID : 17204598

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. KIMBALL, ROBERT, A, ,

Mailing Address 13174 PURDY RD

City  
SARDINIAState  
OHZip Code  
45171-9640FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UFCW Local No. 1099Occupation (for Individual)  
L/U 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  
 11 / 19 / 2019

Transaction ID : 17204599

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

150.00

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