

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

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

FOR LINE NUMBER: PAGE 395 OF 634

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)**

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

A. PARKER, KEVIN, , ,

Mailing Address 20808 SW EGGERT,WAY

City  
BEAVERTON

State  
OR

Zip Code  
97007

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 23 / 2019

Transaction ID : SA11AI.199899

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. PARKER, KEVIN, , ,

Mailing Address 20808 SW EGGERT,WAY

City  
BEAVERTON

State  
OR

Zip Code  
97007

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 01 / 2019

Transaction ID : SA11AI.202558

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. PARKER, KEVIN, , ,

Mailing Address 20808 SW EGGERT,WAY

City  
BEAVERTON

State  
OR

Zip Code  
97007

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 15 / 2019

Transaction ID : SA11AI.201727

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).....▶