

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

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

FOR LINE NUMBER: PAGE 42 OF 206

(check only one)

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

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NAME OF COMMITTEE (In Full)

SEIU COPE (Service Employees International Union Committee On Political Education)

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

A. Deanda, Jose, , ,

Mailing Address 5934 Hudson Ave

City

San Bernardino

State

CA

Zip Code

92404

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

County of San Bernardino

Occupation (for Individual)

Home Healthcare

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 10 / 22 / 2019

Transaction ID : C7510387

Amount of Each Receipt this Period

40.00

☐ Memo Item

\* Payroll Deduction: \$40.00 Monthly

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

B. Del Vecchio, Robert, , ,

Mailing Address 9081 Watson St

City

Cypress

State

CA

Zip Code

90630

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

County of Los Angeles

Occupation (for Individual)

Radiologic Technologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 10 / 21 / 2019

Transaction ID : C7513019

Amount of Each Receipt this Period

60.00

☐ Memo Item

\* Payroll Deduction: \$30.00 Semi-Monthly

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

C. Diaz, Maria, , ,

Mailing Address 2006 E 74th St

City

Los Angeles

State

CA

Zip Code

90001

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

County of Los Angeles

Occupation (for Individual)

Home Healthcare

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 10 / 22 / 2019

Transaction ID : C7510186

Amount of Each Receipt this Period

40.00

☐ Memo Item

\* Payroll Deduction: \$40.00 Monthly

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

140.00

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