

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

 FOR LINE NUMBER:
 (check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 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. BAXTER, LYNDON, L., ,

Mailing Address 2181 W Junction Road

 City
 Chillicothe

 State
 OH

 Zip Code
 45601

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 HIGHWAY TECHNICIAN II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2019

Transaction ID : SA11AI.238607

Amount of Each Receipt this Period

☐ Memo Item

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

B. BAXTER, LYNDON, L., ,

Mailing Address 2181 W Junction Road

 City
 Chillicothe

 State
 OH

 Zip Code
 45601

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)
 HIGHWAY TECHNICIAN II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2019

Transaction ID : SA11AI.238953

Amount of Each Receipt this Period

☐ Memo Item

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

C. BAYER, HENRY, , ,

Mailing Address 1507 W. Chase Street

 City
 Chicago

 State
 IL

 Zip Code
 60626-2125

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 AFSCME INT'L/STATE STREET

 Occupation (for Individual)
 RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2019

Transaction ID : SA11AI.238065

Amount of Each Receipt this Period

☐ Memo Item

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

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