

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

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NAME OF COMMITTEE (In Full)

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

<b>A. BRITTON, JOE, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 4635 Mira Loma Street City Castro Valley State CA Zip Code 94546 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME CA CN 57/EAST BAY PARKS Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00			Date of Receipt M M / D D / Y Y Y Y Y 10 / 11 / 2019 <b>Transaction ID : SA11AI.240371</b> Amount of Each Receipt this Period 10.00 <input type="checkbox"/> Memo Item
<b>B. BRITTON, JOE, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 4635 Mira Loma Street City Castro Valley State CA Zip Code 94546 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME CA CN 57/EAST BAY PARKS Occupation (for Individual) STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00			Date of Receipt M M / D D / Y Y Y Y Y 10 / 11 / 2019 <b>Transaction ID : SA11AI.240384</b> Amount of Each Receipt this Period 10.00 <input type="checkbox"/> Memo Item
<b>C. BROWN, BETSY, L., ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 2314 Ravenna Road City Ravenna State OH Zip Code 44266 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH Occupation (for Individual) CORRECTION OFFICER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00			Date of Receipt M M / D D / Y Y Y Y Y 10 / 11 / 2019 <b>Transaction ID : SA11AI.238628</b> Amount of Each Receipt this Period 10.00 <input type="checkbox"/> Memo Item
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			30.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶			