

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

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

FOR LINE NUMBER: PAGE 245 OF 1019

(check only one)

☒ 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**

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

**A. DI DOMENICO, CRYSTAL, M., ,**

Mailing Address 38426 Village Lane

City  
Mechanicsville

State  
MD

Zip Code  
20659

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

MANAGER, HUMAN RESOURCES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1330.44

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 31 / 2019

Transaction ID : SA11AI.238148

Amount of Each Receipt this Period

68.16

☐ Memo Item

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

**B. DIERINGER, JULIE, A., ,**

Mailing Address 128 S Pear Street

City

Saint Marys

State

OH

Zip Code

45885

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

ADMINISTRATIVE PROFESSIONAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID : SA11AI.238674

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

**C. DIERINGER, JULIE, A., ,**

Mailing Address 128 S Pear Street

City

Saint Marys

State

OH

Zip Code

45885

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

ADMINISTRATIVE PROFESSIONAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

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

Transaction ID : SA11AI.239028

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

88.16