

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

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

FOR LINE NUMBER: PAGE 375 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 <b>A. HALLBOM, ROBERT, E., ,</b>			Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>10 / 11 / 2019</span> </div> <b>Transaction ID : SA11AI.238716</b>	
Mailing Address 10936 Washington Street			Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>10.00</span> </div> <input type="checkbox"/> Memo Item	
City Chagrin Falls	State OH	Zip Code 44023		
FEC ID number of contributing federal political committee. <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>C</span> <span></span> </div>				
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>210.00</span> </div>	
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. HALLBOM, ROBERT, E., ,</b>			Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>10 / 29 / 2019</span> </div> <b>Transaction ID : SA11AI.239072</b>	
Mailing Address 10936 Washington Street			Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>10.00</span> </div> <input type="checkbox"/> Memo Item	
City Chagrin Falls	State OH	Zip Code 44023		
FEC ID number of contributing federal political committee. <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>C</span> <span></span> </div>				
Name of Employer (for Individual) AFSCME OH LOC 11/STATE OF OH				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>220.00</span> </div>	
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. HALLER, JAMES, H., ,</b>			Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>10 / 18 / 2019</span> </div> <b>Transaction ID : SA11AI.237242</b>	
Mailing Address 2037 Burch Avenue			Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>19.24</span> </div> <input type="checkbox"/> Memo Item	
City Lima	State OH	Zip Code 45801		
FEC ID number of contributing federal political committee. <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>C</span> <span></span> </div>				
Name of Employer (for Individual) AFSCME OH LOC 4/LIMA CSD				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>280.88</span> </div>	
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>39.24</span> </div>	
<b>TOTAL</b> This Period (last page this line number only)..... ▶			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span></span> </div>	