

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 518 OF 1019

(check only one)

<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. LEE, ANTOINETTE, , ,

Mailing Address P.O. Box 6728

City

Altadena

State

CA

Zip Code

91003

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME CA LOC 1902

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

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

Transaction ID : SA11AI.239492

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. LEE, ANTOINETTE, , ,

Mailing Address P.O. Box 6728

City

Altadena

State

CA

Zip Code

91003

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME CA LOC 1902

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

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

Transaction ID : SA11AI.239512

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. LEE, MICHELLE, J., ,

Mailing Address 4217 A King George Drive

City

Harrisburg

State

PA

Zip Code

17109

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME PA CN 13/STATE OF PA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

525.00

Date of Receipt

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

Transaction ID : SA11AI.239831

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

70.00

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