

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

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

FOR LINE NUMBER: PAGE 815 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. SHUMAKER, DEBRA, G., ,

Mailing Address 42 Lexington Place

City

Youngstown

State

OH

Zip Code

44515

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:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.20

Date of Receipt

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

Transaction ID : SA11AI.238875

Amount of Each Receipt this Period

13.20

☐ Memo Item

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

B. SHUMAKER, DEBRA, G., ,

Mailing Address 42 Lexington Place

City

Youngstown

State

OH

Zip Code

44515

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:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.40

Date of Receipt

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

Transaction ID : SA11AI.239255

Amount of Each Receipt this Period

13.20

☐ Memo Item

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

C. SHUTE, CARMYN, L., ,

Mailing Address 300 E Uncas Road

City

Port Townsend

State

WA

Zip Code

98368

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME WA CN 28/STATE OF WA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

228.00

Date of Receipt

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

Transaction ID : SA11AI.240100

Amount of Each Receipt this Period

12.00

☐ Memo Item

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

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

38.40