

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

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

FOR LINE NUMBER: PAGE 862 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. STOBART, AMANDA, L., ,

Mailing Address 47900 State Route 124

City
Racine

State
OH

Zip Code
45771

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.02

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 03 / 2019

Transaction ID : SA11AI.239569

Amount of Each Receipt this Period

9.62

☐ Memo Item

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

B. STOBART, AMANDA, L., ,

Mailing Address 47900 State Route 124

City
Racine

State
OH

Zip Code
45771

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 15 / 2019

Transaction ID : SA11AI.239568

Amount of Each Receipt this Period

9.62

☐ Memo Item

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

C. STOBART, AMANDA, L., ,

Mailing Address 47900 State Route 124

City
Racine

State
OH

Zip Code
45771

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH CN 8

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

221.26

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 28 / 2019

Transaction ID : SA11AI.239647

Amount of Each Receipt this Period

9.62

☐ Memo Item

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

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

28.86