

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

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

FOR LINE NUMBER: PAGE 950 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. WESTPHAL, BEN, M., ,**

Mailing Address 2513 Sand Road

City

Marshalltown

State

IA

Zip Code

50158

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

AFSCME IA CN 61/STATE OF IA

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 / 11 / 2019

Transaction ID : SA11AI.240720

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

**B. WESTPHAL, BEN, M., ,**

Mailing Address 2513 Sand Road

City

Marshalltown

State

IA

Zip Code

50158

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 10 / 25 / 2019

Transaction ID : SA11AI.240781

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

**C. WEYER, KEVIN, A., ,**

Mailing Address 1216 Wilson Avenue

City

Vickery

State

OH

Zip Code

43464

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)

MAINTENANCE REPAIR TECH

Receipt For:

☐  
☐

Primary

General

Other (specify)

Aggregate Year-to-Date ▼

315.00

Date of Receipt

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

Transaction ID : SA11AI.238915

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

45.00

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