

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

FOR LINE NUMBER: PAGE 361 OF 540

(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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. PADISAK, WILLIAM, M., , Jr.**

Mailing Address 4886 Pine Trace Drive

City

Austintown

State

OH

Zip Code

44515

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 4

Occupation (for Individual)

FIELD REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

346.23

Date of Receipt

M M	D D	Y Y Y Y
05	16	2019

Transaction ID : SA11AI.224526

Amount of Each Receipt this Period

38.47

☐ Memo Item

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

**B. PADISAK, WILLIAM, M., , Jr.**

Mailing Address 4886 Pine Trace Drive

City

Austintown

State

OH

Zip Code

44515

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 4

Occupation (for Individual)

FIELD REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

384.70

Date of Receipt

M M	D D	Y Y Y Y
05	16	2019

Transaction ID : SA11AI.224578

Amount of Each Receipt this Period

38.47

☐ Memo Item

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

**C. PADISAK, WILLIAM, M., , Jr.**

Mailing Address 4886 Pine Trace Drive

City

Austintown

State

OH

Zip Code

44515

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH LOC 4

Occupation (for Individual)

FIELD REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

423.17

Date of Receipt

M M	D D	Y Y Y Y
05	16	2019

Transaction ID : SA11AI.224630

Amount of Each Receipt this Period

38.47

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

115.41

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