

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 55 OF 360

<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. CAREY, DAMETRA, , ,

Mailing Address P.O. Box 1222

City
ColumbusState
OHZip Code
43216FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.00

Date of Receipt

M M	D D	Y Y Y Y Y Y
04	26	2019

Transaction ID : SA11AI.223890

Amount of Each Receipt this Period

31.00

☐ Memo Item

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

B. CARTER, CHAD, , ,

Mailing Address 6653 13th Street NW

City
WashingtonState
DCZip Code
20012FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
MANAGER, MEMBER AND AFFILIATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.55

Date of Receipt

M M	D D	Y Y Y Y Y Y
04	15	2019

Transaction ID : SA11AI.222832

Amount of Each Receipt this Period

65.65

☐ Memo Item

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

C. CARTER, CHAD, , ,

Mailing Address 6653 13th Street NW

City
WashingtonState
DCZip Code
20012FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME INT'LOccupation (for Individual)
MANAGER, MEMBER AND AFFILIATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

525.20

Date of Receipt

M M	D D	Y Y Y Y Y Y
04	30	2019

Transaction ID : SA11AI.223197

Amount of Each Receipt this Period

65.65

☐ Memo Item

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

162.30

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