

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

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

FOR LINE NUMBER: PAGE 103 OF 614

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SEIU COPE (Service Employees International Union Committee On Political Education)

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

A. Chavez, Jose, , , Jr

Mailing Address 2319 Carlyle Pl

City
Los Angeles

State
CA

Zip Code
90065

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
County of Los Angeles

Occupation (for Individual)
Gain Services Worker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

12 / 30 / 2019

Transaction ID : C7526911

Amount of Each Receipt this Period

20.00

☐ Memo Item

* Payroll Deduction: \$10.00 Semi-Monthly

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

B. Chavez, Maria, D, ,

Mailing Address 19061 Monterey St

City
Hesperia

State
CA

Zip Code
92345

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
County of San Bernardino

Occupation (for Individual)
Home Healthcare

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

12 / 30 / 2019

Transaction ID : C7524322

Amount of Each Receipt this Period

20.00

☐ Memo Item

* Payroll Deduction: \$20.00 Monthly

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

C. Chavez, Yaneth, , ,

Mailing Address 727 E Belmont St

City
Ontario

State
CA

Zip Code
91761

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
County of San Bernardino

Occupation (for Individual)
Home Healthcare

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

12 / 30 / 2019

Transaction ID : C7524790

Amount of Each Receipt this Period

20.00

☐ Memo Item

* Payroll Deduction: \$20.00 Monthly

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

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

60.00