

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

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

FOR LINE NUMBER:
(check only one)

PAGE 195 OF 614

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

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

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

A. Gonzalez, Ma De Jesus, , ,

Mailing Address 5543 Orange Ave

City
Long Beach

State
CA

Zip Code
90805

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
County of Los Angeles

Occupation (for Individual)
Home Healthcare

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 30 / 2019

Transaction ID : C7525015

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

B. Gonzalez, Mirna, , ,

Mailing Address 12322 Inglewood Ave

City
Hawthorne

State
CA

Zip Code
90250

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
County of Los Angeles

Occupation (for Individual)
Home Healthcare

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 30 / 2019

Transaction ID : C7524684

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. Gonzalez, Robert, , ,

Mailing Address 1416 W Delhaven St

City
West Covina

State
CA

Zip Code
91790

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
County of Los Angeles

Occupation (for Individual)
Animal Control Officer II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 30 / 2019

Transaction ID : C7527315

Amount of Each Receipt this Period

20.00

☐ Memo Item

* Payroll Deduction: \$10.00 Semi-Monthly

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

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

60.00