

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 431 OF 1661
(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. ENNIS, JENNIFER, L., ,

Mailing Address 2621 Factory Road

City
AlbanyState
OHZip Code
45710FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 4/ALEXANDEROccupation (for Individual)
TEACHER AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.66

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
12	20	2019

Transaction ID : SA11AI.249882

Amount of Each Receipt this Period

10.42

☐ Memo Item

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

B. ERICKSON, DARYL, A., ,

Mailing Address 240 Parkridge Drive

City
Mason cityState
IAZip Code
50401FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/STATE OF IAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
12	02	2019

Transaction ID : SA11AI.251185

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

C. ERICKSON, DARYL, A., ,

Mailing Address 240 Parkridge Drive

City
Mason cityState
IAZip Code
50401FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IA CN 61/STATE OF IAOccupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
12	06	2019

Transaction ID : SA11AI.251235

Amount of Each Receipt this Period

20.00

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

70.42

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