

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 712 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
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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. JAMESON, NEAL, , , III**

Mailing Address 11009 Palatka Court

City  
IndianapolisState  
INZip Code  
46236FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AFSCME INT'LOccupation (for Individual)  
ORGANIZER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

512.82

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	13	/	2019

Transaction ID : SA11AI.246442

Amount of Each Receipt this Period

25.28

☐ Memo Item

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

**B. JAMESON, NEAL, , , III**

Mailing Address 11009 Palatka Court

City  
IndianapolisState  
INZip Code  
46236FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AFSCME INT'LOccupation (for Individual)  
ORGANIZER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

538.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2019

Transaction ID : SA11AI.246831

Amount of Each Receipt this Period

25.28

☐ Memo Item

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

**C. JAMIESON, MARY, , ,**Mailing Address 452 Danton Avenue  
Unit CCity  
OrlandoState  
FLZip Code  
32811FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AFSCME NM CN 18/ALBUQUERQUEOccupation (for Individual)  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

351.50

Date of Receipt

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

Transaction ID : SA11AI.252512

Amount of Each Receipt this Period

55.50

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

106.06

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