

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

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

FOR LINE NUMBER: PAGE 713 OF 1661

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. JAMIESON, MARY, , ,

Mailing Address 452 Danton Avenue
Unit C

City
Orlando

State
FL

Zip Code
32811

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME NM CN 18/ALBUQUERQUE

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 16 / 2019

Transaction ID : SA11AI.252518

Amount of Each Receipt this Period

18.50

☐ Memo Item

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

B. JAMIESON, MARY, , ,

Mailing Address 452 Danton Avenue
Unit C

City
Orlando

State
FL

Zip Code
32811

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME NM CN 18/ALBUQUERQUE

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.50

Date of Receipt

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

Transaction ID : SA11AI.252535

Amount of Each Receipt this Period

18.50

☐ Memo Item

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

C. JAMISON, JOCELYN, , ,

Mailing Address 4031 Executive Park Drive

City
Harrisburg

State
PA

Zip Code
17111

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

424.41

Date of Receipt

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

Transaction ID : SA11AI.249481

Amount of Each Receipt this Period

43.85

☐ Memo Item

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

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

80.85