

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

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

FOR LINE NUMBER: PAGE 808 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. KUNS, SARA, A., ,

Mailing Address 5607 Susan Drive

City
Castalia

State
OH

Zip Code
44824

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
HOSPITAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

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

Transaction ID : SA11AI.248502

Amount of Each Receipt this Period

9.00

☐ Memo Item

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

B. KUNZE, ERICH, , ,

Mailing Address 7723 Freesia Way

City
Fontana

State
CA

Zip Code
92336

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME CA LOC 1902

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 23 / 2019

Transaction ID : SA11AI.252318

Amount of Each Receipt this Period

8.00

☐ Memo Item

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

C. KUNZE, LEANNE, P., ,

Mailing Address 123 4th Avenue W
#301

City
Olympia

State
WA

Zip Code
98501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME WA CN 28

Occupation (for Individual)
DEPUTY EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1384.00

Date of Receipt

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

Transaction ID : SA11AI.249192

Amount of Each Receipt this Period

141.00

☐ Memo Item

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

158.00

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