

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1066 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. NOLAN, MARIAN, S., ,

Mailing Address 804 E 33rd Street

City
LorainState
OHZip Code
44055FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ODJFS CUSTOMER SERVICE REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.50

Date of Receipt

M M	D D	Y Y Y Y
12	06	2019

Transaction ID : SA11AI.248012

Amount of Each Receipt this Period

8.50

☐ Memo Item

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

B. NOLAN, MARIAN, S., ,

Mailing Address 804 E 33rd Street

City
LorainState
OHZip Code
44055FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OHOccupation (for Individual)
ODJFS CUSTOMER SERVICE REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.00

Date of Receipt

M M	D D	Y Y Y Y
12	20	2019

Transaction ID : SA11AI.248592

Amount of Each Receipt this Period

8.50

☐ Memo Item

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

C. NOON, TAMMAR, M., ,

Mailing Address P.O. Box 273

City
Silver SpringState
PAZip Code
17575FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME PA CN 13/NSP/LOCAL 982Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M	D D	Y Y Y Y
12	13	2019

Transaction ID : SA11AI.249547

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

47.00

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