

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

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

FOR LINE NUMBER: PAGE 1370 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. SPEER, BOBBI JEAN, , ,

Mailing Address 2338 E 14th Street

City

Des Moines

State

IA

Zip Code

50316

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME IA CN 61/STATE OF IA

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID : SA11AI.251355

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. SPELICH, LISA, D., ,

Mailing Address 2208 Atlantic Street NE

City

Warren

State

OH

Zip Code

44483

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH CN 8/TRUMBULL

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 03 / 2019

Transaction ID : SA11AI.251394

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. SPELICH, LISA, D., ,

Mailing Address 2208 Atlantic Street NE

City

Warren

State

OH

Zip Code

44483

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME OH CN 8/TRUMBULL

Occupation (for Individual)

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 09 / 2019

Transaction ID : SA11AI.251475

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

30.00

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