

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

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

FOR LINE NUMBER: PAGE 6 OF 47
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UNITED FOOD AND COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. HUM, MILTON, , ,			Date of Receipt <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 03 / 06 / 2019</div> </div> Transaction ID : 15845883		
Mailing Address 747 6TH AVENUE			Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">76.00</div>		
City SAN FRANCISCO	State CA	Zip Code 94118-3872	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. <div style="border: 1px solid black; padding: 2px; text-align: center;">C</div>			Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">228.00</div>		
Name of Employer (for Individual) UFCW Local No. 648			Occupation (for Individual) L/U Representative		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">228.00</div>		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. LARSON, DAN, , ,			Date of Receipt <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 03 / 06 / 2019</div> </div> Transaction ID : 15845884		
Mailing Address 1980 Mission Street			Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">76.00</div>		
City San Francisco	State CA	Zip Code 94103-3405	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. <div style="border: 1px solid black; padding: 2px; text-align: center;">C</div>			Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">228.00</div>		
Name of Employer (for Individual) UFCW Local No. 648			Occupation (for Individual) L/U Representative		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">228.00</div>		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. CARUSO, BARBARA, J, ,			Date of Receipt <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 03 / 06 / 2019</div> </div> Transaction ID : 15845894		
Mailing Address 146 OWOSSO AVE			Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">77.00</div>		
City FAIRLAWN	State OH	Zip Code 44333-3725	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. <div style="border: 1px solid black; padding: 2px; text-align: center;">C</div>			Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">231.00</div>		
Name of Employer (for Individual) UFCW Local No. 880			Occupation (for Individual) L/U Representative		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">231.00</div>		
SUBTOTAL of Receipts This Page (optional)..... ▶			<div style="border: 1px solid black; padding: 2px; text-align: right;">229.00</div>		
TOTAL This Period (last page this line number only)..... ▶			<div style="border: 1px solid black; padding: 2px; text-align: right;">77.00</div>		