

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

FOR LINE NUMBER: PAGE 104 OF 1376

(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. BLANFORD, WILLIAM, , ,**

Mailing Address 1212 Jefferson Street SE

City  
OlympiaState  
WAZip Code  
98501FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AFSCME WA CN 28/STATE OF WAOccupation (for Individual)  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		25		2019

Transaction ID : SA11AI.244754

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. BLATT, RONALD, F., ,**Mailing Address 2202 S. Racoon Road  
Apt. 4

City

Austintown

State  
OHZip Code  
44515FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AFSCME OH LOC 4Occupation (for Individual)  
FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

884.81

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		18		2019

Transaction ID : SA11AI.244995

Amount of Each Receipt this Period

38.47

☐ Memo Item

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

**C. BLATT, RONALD, F., ,**Mailing Address 2202 S. Racoon Road  
Apt. 4

City

Austintown

State  
OHZip Code  
44515FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AFSCME OH LOC 4Occupation (for Individual)  
FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

923.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		18		2019

Transaction ID : SA11AI.245172

Amount of Each Receipt this Period

38.47

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

101.94