

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 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. CARLOSS, ANGELA, L., ,**

Mailing Address 9675 Gertrude Lane

City  
Cincinnati

State  
OH

Zip Code  
45231

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AFSCME OH CN 8/CINCINNATI CITY

Occupation (for Individual)  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 08 / 2019

Transaction ID : SA11AI.245328

Amount of Each Receipt this Period

28.86

☐ Memo Item

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

**B. CARPENTER, ADDO, , , JR.**

Mailing Address 9212a S Halsted Avenue

City  
Chicago

State  
IL

Zip Code  
60620

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)  
CHILD WELFARE SPECIALIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 01 / 2019

Transaction ID : SA11AI.242035

Amount of Each Receipt this Period

63.00

☐ Memo Item

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

**C. CARPENTER, ADDO, , , JR.**

Mailing Address 9212a S Halsted Avenue

City  
Chicago

State  
IL

Zip Code  
60620

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)  
CHILD WELFARE SPECIALIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

512.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 01 / 2019

Transaction ID : SA11AI.242697

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

141.86