

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

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

FOR LINE NUMBER: PAGE 264 OF 1376

(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. COX, DEBORA, F., ,

Mailing Address 10735 Willfleet Drive

City
Cincinnati

State
OH

Zip Code
45241

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
WORKERS COMP REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

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

Transaction ID : SA11AI.243031

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. COX, DEBORA, F., ,

Mailing Address 10735 Willfleet Drive

City
Cincinnati

State
OH

Zip Code
45241

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
WORKERS COMP REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 22 / 2019

Transaction ID : SA11AI.243577

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. COX, MICHELLE, M ., ,

Mailing Address 102 Squires Court

City
South Amherst

State
OH

Zip Code
44001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

207.00

Date of Receipt

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

Transaction ID : SA11AI.243032

Amount of Each Receipt this Period

9.00

☐ Memo Item

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

29.00

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