

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

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

FOR LINE NUMBER: PAGE 677 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. KOSER, RICHARD, A., ,

Mailing Address 576 Dyas Drive

City
Mansfield

State
OH

Zip Code
44905

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 COMPENSATION CLAIMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

590.00

Date of Receipt

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

Transaction ID : SA11AI.243211

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. KOSER, RICHARD, A., ,

Mailing Address 576 Dyas Drive

City
Mansfield

State
OH

Zip Code
44905

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 COMPENSATION CLAIMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

620.00

Date of Receipt

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

Transaction ID : SA11AI.243767

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. KOUVEI, AYI, K., ,

Mailing Address 2146 Downing Avenue

City
Shakopee

State
MN

Zip Code
55379

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME MN CN 5/STATE OF MN

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID : SA11AI.245627

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

90.00

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