

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

FOR LINE NUMBER: PAGE 972 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. POTTER, MELODY, A., ,**

Mailing Address 764 Waynoka Drive

City  
SardiniaState  
OHZip Code  
45171FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.40

Date of Receipt

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

Transaction ID : SA11AI.245251

Amount of Each Receipt this Period

20.84

☐ Memo Item

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

**B. POUND, LYNETTE, , ,**

Mailing Address 24 East Metcalf

City  
ErieState  
PAZip Code  
16504FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AFSCME PA CN 13Occupation (for Individual)  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

452.79

Date of Receipt

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

Transaction ID : SA11AI.244286

Amount of Each Receipt this Period

43.04

☐ Memo Item

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

**C. POWELL, CARLISHA, , ,**

Mailing Address 3820 Chagrin Blvd.

City  
BeachwoodState  
OHZip Code  
44122FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AFSCME OH CN 8Occupation (for Individual)  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

650.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2019

Transaction ID : SA11AI.245375

Amount of Each Receipt this Period

60.66

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

124.54

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