

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

NEA Fund for Children and Public Education

ADDRESS (number and street) 1201 16th Street NW Ste 418

Check if different than previously reported. (ACC) Washington DC 20036-3290

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00003251

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2)
  - Mar 20 (M3)
  - Apr 20 (M4)
  - Jul 20 (M7)
  - May 20 (M5)
  - Jun 20 (M6)
  - Oct 20 (M10)
  - Aug 20 (M8)
  - Sep 20 (M9)
  - Nov 20 (M11) (Non-Election Year Only)
  - Dec 20 (M12) (Non-Election Year Only)
  - Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P)
  - General (12G)
  - Runoff (12R)
  - Convention (12C)
  - Special (12S)

Election on [MM] / [DD] / [YYYY] in the State of [ ]

- (d) 30-Day POST-Election Report for the:
- General (30G)
  - Runoff (30R)
  - Special (30S)

Election on [MM] / [DD] / [YYYY] in the State of [ ]

5. Covering Period [MM] / [DD] / [YYYY] 06 / 01 / 2014 through [MM] / [DD] / [YYYY] 06 / 30 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Michael McPherson

Signature of Treasurer Michael McPherson [Electronically Filed] Date 07 / 18 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

|                 |  |  |  |  |  |  |  |  |  |
|-----------------|--|--|--|--|--|--|--|--|--|
| Office Use Only |  |  |  |  |  |  |  |  |  |
|-----------------|--|--|--|--|--|--|--|--|--|

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**NEA Fund for Children and Public Education**

Report Covering the Period: From:  /  /  To:  /  /

|  | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand<br>January 1, <input type="text" value="2014"/>  |                         | 1869791.85                        |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | 1752356.65              |                                   |
| (c) Total Receipts (from Line 19) .....  | 195524.79               | 808635.30                         |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | 1947881.44              | 2678427.15                        |
| 7. Total Disbursements (from Line 31).....   | 468977.30               | 1199523.01                        |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | 1478904.14              | 1478904.14                        |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                   |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 0.00                    |                                   |

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**NEA Fund for Children and Public Education**

Report Covering the Period: From:  /  /  To:  /  /

| I. Receipts   | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees   |                               |                                   |
| (i) Itemized (use Schedule A).....  | 20315.36                      | 53169.38                          |
| (ii) Unitemized .....   | 175209.43                     | 753465.92                         |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶  | 195524.79                     | 806635.30                         |
| (b) Political Party Committees .....  | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....  | 0.00                          | 0.00                              |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....  | 195524.79                     | 806635.30                         |
| 12. Transfers From Affiliated/Other Party Committees.....   | 0.00                          | 0.00                              |
| 13. All Loans Received .....  | 0.00                          | 0.00                              |
| 14. Loan Repayments Received.....   | 0.00                          | 0.00                              |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00                          | 0.00                              |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....           | 0.00                          | 2000.00                           |
| 17. Other Federal Receipts (Dividends, Interest, etc.).....   | 0.00                          | 0.00                              |
| 18. Transfers from Non-Federal and Levin Funds  |                               |                                   |
| (a) Non-Federal Account (from Schedule H3).....   | 0.00                          | 0.00                              |
| (b) Levin Funds (from Schedule H5) .....  | 0.00                          | 0.00                              |
| (c) Total Transfers (add 18(a) and 18(b))..   | 0.00                          | 0.00                              |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶                        | 195524.79                     | 808635.30                         |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶                                  | 195524.79                     | 808635.30                         |

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:  |                               |                                   |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4)                                  |                               |                                   |
| (i) Federal Share .....  | 0.00                          | 0.00                              |
| (ii) Non-Federal Share.....  | 0.00                          | 0.00                              |
| (b) Other Federal Operating Expenditures .....   | 477.30                        | 4052.61                           |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 477.30                        | 4052.61                           |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 408500.00                     | 1114500.00                        |
| 24. Independent Expenditures (use Schedule E) .....  | 0.00                          | 0.00                              |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....                   | 0.00                          | 0.00                              |
| 26. Loan Repayments Made.....  | 0.00                          | 0.00                              |
| 27. Loans Made.....  | 0.00                          | 0.00                              |
| 28. Refunds of Contributions To:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 0.00                          | 770.40                            |
| (b) Political Party Committees .....   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....   | 0.00                          | 0.00                              |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....                            | 0.00                          | 770.40                            |
| 29. Other Disbursements .....  | 60000.00                      | 80200.00                          |
| 30. Federal Election Activity (2 U.S.C. §431(20))  |                               |                                   |
| (a) Allocated Federal Election Activity (from Schedule H6)                                     |                               |                                   |
| (i) Federal Share .....  | 0.00                          | 0.00                              |
| (ii) "Levin" Share.....  | 0.00                          | 0.00                              |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 0.00                          | 0.00                              |
| (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....           | 0.00                          | 0.00                              |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..      | 468977.30                     | 1199523.01                        |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 468977.30                     | 1199523.01                        |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 195524.79                     | 806635.30                         |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 0.00                          | 770.40                            |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 195524.79                     | 805864.90                         |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 477.30                        | 4052.61                           |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                 | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | 477.30                        | 4052.61                           |

**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)       | PAGE 6 OF 103                |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)  
**A. MATHIEU R AGEE**

Mailing Address 1870 BOGEY HILL DR

City State Zip Code  
PACIFIC MO 63069-4457

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
MERAMEC VALLEY R-III CLASSROOM TEACHER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.00

Date of Receipt  
MM / DD / YYYY  
06 / 12 / 2014  
**Transaction ID : A2014-1446348**

Amount of Each Receipt this Period  
180.00

Full Name (Last, First, Middle Initial)  
**B. Jesse M Aguilar**

Mailing Address 8009 Cold Creek Ct

City State Zip Code  
Bakersfield CA 93313

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
KERN UNION HIGH CLASSROOM TEACHER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
217.40

Date of Receipt  
MM / DD / YYYY  
06 / 17 / 2014  
**Transaction ID : A2014-1451340**

Amount of Each Receipt this Period  
132.60

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)  
**C. Jose J Alcala**

Mailing Address 19944 SAN LUIS REY LN

City State Zip Code  
Moreno Valley CA 92508-6495

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
MORENO VALLEY UNIFIED EDUCATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
348.10

Date of Receipt  
MM / DD / YYYY  
06 / 17 / 2014  
**Transaction ID : A2014-1452478**

Amount of Each Receipt this Period  
151.90

PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 464.50

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI  
Transaction ID :

Please note that the PAC is aware that we follow an alternate method of itemizing payroll receipts rather than the suggested manner of disclosing a single total for the reporting period along with the amount deducted per pay period. Because the amounts collected per pay period may change often during the time covered by a single report, we find that reporting individual deductions separately more accurately discloses how the receipts are collected.

Form/Schedule:  
Transaction ID:

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

|   |                              |                              |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 8 OF 103                |
|   | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                 | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 12  |
|   |                              | <input type="checkbox"/> 15  |
|   |                              | <input type="checkbox"/> 16  |
|   |                              | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

**A. PAT H ALEXANDER**  
Full Name (Last, First, Middle Initial)

Mailing Address 10041 COTTONMILL LN

City COLUMBIA State MD Zip Code 21046-1312

FEC ID number of contributing federal political committee. **C**

Name of Employer Maryland State Teachers Association Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.10

Date of Receipt 06 / 19 / 2014  
**Transaction ID : A2014-1481046**

Amount of Each Receipt this Period 33.35

PAYROLL DEDUCTION

**B. KIMBERLY A ANDERSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 1300 DARTMOUTH RD

City ALEXANDRIA State VA Zip Code 22314-4786

FEC ID number of contributing federal political committee. **C**

Name of Employer NATIONAL EDUCATION ASSOCIATION Occupation DIRECTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt 06 / 11 / 2014  
**Transaction ID : A2014-1459524**

Amount of Each Receipt this Period 200.00

PAYROLL DEDUCTION

**C. DEEANN AULL**  
Full Name (Last, First, Middle Initial)

Mailing Address 1810 E ELM ST

City JEFFERSON CITY State MO Zip Code 65101-4100

FEC ID number of contributing federal political committee. **C**

Name of Employer Missouri NEA Occupation Asst Executive Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 13 / 2014  
**Transaction ID : A2014-1465421**

Amount of Each Receipt this Period 25.00

PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 258.35

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



**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)       | PAGE 9 OF 103                |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

**A. DEEANN AULL**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1810 E ELM ST  
City JEFFERSON CITY State MO Zip Code 65101-4100  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Missouri NEA Occupation Asst Executive Director  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **275.00**

Date of Receipt **06 / 27 / 2014**  
**Transaction ID : A2014-1465422**  
Amount of Each Receipt this Period **25.00**  
**PAYROLL DEDUCTION**

**B. TRACEY J AYER**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1646 SHERWOOD VILLAGE CIR  
City PLACENTIA State CA Zip Code 92870-3117  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NORWALK LA MIRADA UNIFIED SCHOOL DISTRICT Occupation CLASSROOM TEACHER  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **436.00**

Date of Receipt **06 / 17 / 2014**  
**Transaction ID : A2014-1492838**  
Amount of Each Receipt this Period **164.00**  
**PAYROLL DEDUCTION**

**C. GILBERT BALDERRAMA**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4496 MARYLAND AVE APT 2D  
City SAINT LOUIS State MO Zip Code 63108-2481  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Missouri NEA Occupation UNISERV DIRECTOR  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **220.00**

Date of Receipt **06 / 27 / 2014**  
**Transaction ID : A2014-1469690**  
Amount of Each Receipt this Period **20.00**  
**PAYROLL DEDUCTION**

**SUBTOTAL** of Receipts This Page (optional)..... **209.00**  
**TOTAL** This Period (last page this line number only).....

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

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

FOR LINE NUMBER: PAGE 10 OF 103  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

**A. WINETTA M BELT-VARGAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3148 BROOKRIDGE RD  
 City State Zip Code  
 DUARTE CA 91010-1548  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 EL MONTE UNION HIGH CLASSROOM TEACHER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 215.90

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 17 / 2014  
**Transaction ID : A2014-1481574**  
 Amount of Each Receipt this Period  
 134.10  
 PAYROLL DEDUCTION

**B. Gayle L Bilek**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1537 Via Arroyo  
 City State Zip Code  
 Paso Robles CA 93446-1837  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 TEMPLETON UNIFIED CLASSROOM TEACHER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 352.40

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 17 / 2014  
**Transaction ID : A2014-1451324**  
 Amount of Each Receipt this Period  
 147.60  
 PAYROLL DEDUCTION

**C. Katherine Bishop**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6504 NW 130TH ST  
 City State Zip Code  
 Oklahoma City OK 73142-6001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 PUTNAM CITY PUBLIC SCHOOL CLASSROOM TEACHER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 03 / 2014  
**Transaction ID : A2014-1456397**  
 Amount of Each Receipt this Period  
 50.00  
 PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 331.70  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 11 OF 103  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)  
**A. JOYCE A BLAKNEY**

Mailing Address 312 MORRILL RD

City WINSLOW State ME Zip Code 04901-0063

FEC ID number of contributing federal political committee. **C**

Name of Employer WATERVILLE PUBLIC SCHOOLS Occupation CLASSROOM TEACHER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **495.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 17 / 2014**

**Transaction ID : A2014-1447681**

Amount of Each Receipt this Period  
**75.00**

Full Name (Last, First, Middle Initial)  
**B. Charlotte Booker**

Mailing Address 3650 DRUIDS DR SE

City CONYERS State GA Zip Code 30013-2976

FEC ID number of contributing federal political committee. **C**

Name of Employer ROCKDALE COUNTY SCHOOL DIST Occupation INSTRUCTIONAL SPECIALIST

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 17 / 2014**

**Transaction ID : A2014-1447677**

Amount of Each Receipt this Period  
**50.00**

Full Name (Last, First, Middle Initial)  
**C. CARL D BULLARD**

Mailing Address 3594 EUGENE ST

City TRACY State CA Zip Code 94538-3432

FEC ID number of contributing federal political committee. **C**

Name of Employer FREMONT UNIFIED DIST T A Occupation CLASSROOM TEACHER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **786.93**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 17 / 2014**

**Transaction ID : A2014-1471961**

Amount of Each Receipt this Period  
**213.08**

**PAYROLL DEDUCTION**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **338.08**

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

**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) | PAGE 12 OF 103  |
| <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)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)  
**A. FRANK A BURGER**

Mailing Address 5061 SANDALWOOD DR

City FENTON State MI Zip Code 48439-4261

FEC ID number of contributing federal political committee. **C**

Name of Employer CARMAN-AINSWORTH SCHOOLS Occupation CLASSROOM TEACHER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **205.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : A2014-1463177**

Amount of Each Receipt this Period  
**100.00**

**PAYROLL DEDUCTION**

Full Name (Last, First, Middle Initial)  
**B. ERIK W BURKE**

Mailing Address 1232 E 6TH AVE

City HELENA State MT Zip Code 59601-3927

FEC ID number of contributing federal political committee. **C**

Name of Employer MEA - MFT Occupation Executive Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 17 / 2014**

**Transaction ID : A2014-1447678**

Amount of Each Receipt this Period  
**50.00**

Full Name (Last, First, Middle Initial)  
**C. Lori K Burris**

Mailing Address 3200 NW 69th St

City Oklahoma City State OK Zip Code 73116-3309

FEC ID number of contributing federal political committee. **C**

Name of Employer MID-DEL PUBLIC SCHOOLS Occupation Classroom Teacher

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 03 / 2014**

**Transaction ID : A2014-1456357**

Amount of Each Receipt this Period  
**30.00**

**PAYROLL DEDUCTION**

|  |              |
|--|--------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | <b>90.00</b> |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |              |

**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)       | PAGE 13 OF 103               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)  
**A. Lynda Campfield**

Mailing Address 527 23RD AVE  
APT 111

City Oakland State CA Zip Code 94606-5324

FEC ID number of contributing federal political committee. **C**

Name of Employer San Leandro USD Occupation Educator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**798.77**

Date of Receipt  
**06 / 17 / 2014**

**Transaction ID : A2014-1451523**

Amount of Each Receipt this Period  
**201.23**

**PAYROLL DEDUCTION**

Full Name (Last, First, Middle Initial)  
**B. JOANNA CHOI**

Mailing Address 3355 MARTHA CUSTIS DR

City ALEXANDRIA State VA Zip Code 22302-2117

FEC ID number of contributing federal political committee. **C**

Name of Employer NATIONAL EDUCATION ASSOCIATION Occupation MANAGER D

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**360.00**

Date of Receipt  
**06 / 11 / 2014**

**Transaction ID : A2014-1466495**

Amount of Each Receipt this Period  
**80.00**

**PAYROLL DEDUCTION**

Full Name (Last, First, Middle Initial)  
**C. MICAELA C CICHOCKI**

Mailing Address 3240 GIBALTAR DR

City RIVERSIDE State CA Zip Code 92506-2135

FEC ID number of contributing federal political committee. **C**

Name of Employer SAN BERNARDINO CITY UNIFIED Occupation CLASSROOM TEACHER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**235.34**

Date of Receipt  
**06 / 17 / 2014**

**Transaction ID : A2014-1493057**

Amount of Each Receipt this Period  
**114.67**

**PAYROLL DEDUCTION**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **395.90**

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

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

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

FOR LINE NUMBER: PAGE 14 OF 103  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

**A. PEGGY COCHRAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1810 EAST ELM ST  
 City State Zip Code  
 JEFFERSON CITY MO 65101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NATIONAL EDUCATION ASSOCIATION State Affiliate Executive Director  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 935.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 12 / 2014  
**Transaction ID : A2014-1446350**  
 Amount of Each Receipt this Period  
 200.00

**B. PEGGY COCHRAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1810 EAST ELM ST  
 City State Zip Code  
 JEFFERSON CITY MO 65101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NATIONAL EDUCATION ASSOCIATION State Affiliate Executive Director  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 935.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 12 / 2014  
**Transaction ID : A2014-1446343**  
 Amount of Each Receipt this Period  
 180.00

**C. PEGGY COCHRAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1810 EAST ELM ST  
 City State Zip Code  
 JEFFERSON CITY MO 65101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NATIONAL EDUCATION ASSOCIATION State Affiliate Executive Director  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 935.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 12 / 2014  
**Transaction ID : A2014-1446344**  
 Amount of Each Receipt this Period  
 180.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 560.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

|   |                              |                              |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 15 OF 103               |
|   | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                 | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 12  |
|   |                              | <input type="checkbox"/> 16  |
|   |                              | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

**A. PEGGY COCHRAN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1810 EAST ELM ST  
City JEFFERSON CITY State MO Zip Code 65101  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NATIONAL EDUCATION ASSOCIATION Occupation State Affiliate Executive Director  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 935.00

Date of Receipt  
06 / 12 / 2014  
**Transaction ID : A2014-1446349**  
Amount of Each Receipt this Period  
200.00

**B. PEGGY COCHRAN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1810 EAST ELM ST  
City JEFFERSON CITY State MO Zip Code 65101  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NATIONAL EDUCATION ASSOCIATION Occupation State Affiliate Executive Director  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 960.00

Date of Receipt  
06 / 13 / 2014  
**Transaction ID : A2014-1467489**  
Amount of Each Receipt this Period  
25.00  
PAYROLL DEDUCTION

**C. PEGGY COCHRAN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1810 EAST ELM ST  
City JEFFERSON CITY State MO Zip Code 65101  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NATIONAL EDUCATION ASSOCIATION Occupation State Affiliate Executive Director  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 985.00

Date of Receipt  
06 / 27 / 2014  
**Transaction ID : A2014-1467490**  
Amount of Each Receipt this Period  
25.00  
PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 250.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 16 OF 103  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)  
**A. JOSEPH COUGHLIN**

Mailing Address 852 SUE GROVE RD

City State Zip Code  
 BALTIMORE MD 21221-1834

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 BALTIMORE COUNTY PUBLIC SCHOOLS EDUCATOR

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 263.36

Date of Receipt  
 06 / 25 / 2014  
**Transaction ID : A2014-1542068**

Amount of Each Receipt this Period  
 200.00

Full Name (Last, First, Middle Initial)  
**B. VICTORIA A COURTNEY**

Mailing Address 5013 STUMBLING COLT CT

City State Zip Code  
 LAS VEGAS NV 89131-3699

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 Clark County Education Assoc CLASSROOM TEACHER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 225.00

Date of Receipt  
 06 / 12 / 2014  
**Transaction ID : A2014-1446369**

Amount of Each Receipt this Period  
 50.00

Full Name (Last, First, Middle Initial)  
**C. VICTORIA A COURTNEY**

Mailing Address 5013 STUMBLING COLT CT

City State Zip Code  
 LAS VEGAS NV 89131-3699

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 Clark County Education Assoc CLASSROOM TEACHER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 06 / 17 / 2014  
**Transaction ID : A2014-1447661**

Amount of Each Receipt this Period  
 25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 275.00

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



**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) | PAGE 17 OF 103  |
| <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)  
**NEA Fund for Children and Public Education**

**A. Cindy I Crawford**  
Full Name (Last, First, Middle Initial)  
Mailing Address 8015 Mountain View Dr  
STE F  
City Pleasanton State CA Zip Code 94588-4740  
FEC ID number of contributing federal political committee. **C**  
Name of Employer SAN LORENZO UNIFIED Occupation CLASSROOM TEACHER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 342.30

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 17 / 2014  
**Transaction ID : A2014-1452483**  
Amount of Each Receipt this Period  
157.70  
PAYROLL DEDUCTION

**B. Karen P Crouse**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1077 JACKSON DITCH RD  
City Harrington State DE Zip Code 19952-2423  
FEC ID number of contributing federal political committee. **C**  
Name of Employer LAKE FOREST SCHOOL DISTRICT Occupation SECRETARY/STENO  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 209.44

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 13 / 2014  
**Transaction ID : A2014-1459941**  
Amount of Each Receipt this Period  
13.68  
PAYROLL DEDUCTION

**C. Karen P Crouse**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1077 JACKSON DITCH RD  
City Harrington State DE Zip Code 19952-2423  
FEC ID number of contributing federal political committee. **C**  
Name of Employer LAKE FOREST SCHOOL DISTRICT Occupation SECRETARY/STENO  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 223.12

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 20 / 2014  
**Transaction ID : A2014-1459942**  
Amount of Each Receipt this Period  
13.68  
PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 185.06  
**TOTAL** This Period (last page this line number only)..... ▶

**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)       | PAGE 18 OF 103               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

|   |                                    |  |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Noemi Cuadrado</b>   |                                    | Date of Receipt<br>MM / DD / YYYY<br>06 / 17 / 2014<br><b>Transaction ID : A2014-1447523</b> |
| Mailing Address Psc 477 Box 38  |                                    | Amount of Each Receipt this Period<br>10.00  |
| City<br>Fpo   | State<br>ZZ                        | Zip Code<br>96306  |
| FEC ID number of contributing federal political committee.<br>C   |                                    |  |
| Name of Employer<br>DEPT OF DEFENSE   | Occupation<br>Classroom Teacher    |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>240.00 |  |

|   |                                    |  |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>B. KENNARD L CURTIS</b>   |                                    | Date of Receipt<br>MM / DD / YYYY<br>06 / 12 / 2014<br><b>Transaction ID : A2014-1446351</b> |
| Mailing Address 157 QUINWOOD AVE  |                                    | Amount of Each Receipt this Period<br>250.00   |
| City<br>VALLEY PARK   | State<br>MO                        | Zip Code<br>63088  |
| FEC ID number of contributing federal political committee.<br>C   |                                    |  |
| Name of Employer<br>Retired   | Occupation<br>RETIRED              |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00 |  |

|   |                                    |  |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>C. KERRIE A DALLMAN</b>   |                                    | Date of Receipt<br>MM / DD / YYYY<br>06 / 26 / 2014<br><b>Transaction ID : A2014-1449289</b> |
| Mailing Address 11766 MOBILE ST   |                                    | Amount of Each Receipt this Period<br>11.15  |
| City<br>DENVER  | State<br>CO                        | Zip Code<br>80022-6217   |
| FEC ID number of contributing federal political committee.<br>C   |                                    |  |
| Name of Employer<br>Colorado Education Association  | Occupation<br>PRESIDENT            |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>275.15 |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 271.15 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |        |

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

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

FOR LINE NUMBER: PAGE 19 OF 103  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)  
**A. LINDA M DAVIN**

Mailing Address 2731 UNICORN LN NW

City State Zip Code  
 WASHINGTON DC 20015-2233

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 NATIONAL EDUCATION ASSOCIATION SENIOR POLICY ANALYST

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 11 / 2014  
**Transaction ID : A2014-1465373**

Amount of Each Receipt this Period  
 40.00

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)  
**B. NATHAN DAWSON**

Mailing Address 379 HULL AVE

City State Zip Code  
 SAN JOSE CA 95125-1646

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 ALUM ROCK UNION ELEMENTARY CLASSROOM TEACHER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 245.60

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 17 / 2014  
**Transaction ID : A2014-1485141**

Amount of Each Receipt this Period  
 154.40

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)  
**C. TIMOTHY C DEDMAN**

Mailing Address 1201 16TH ST NW  
 # 412

City State Zip Code  
 WASHINGTON DC 20036-3201

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 NATIONAL EDUCATION ASSOCIATION ORGANIZATIONAL SPECIALIST

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 11 / 2014  
**Transaction ID : A2014-1463108**

Amount of Each Receipt this Period  
 150.00

PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 344.40

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

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

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

FOR LINE NUMBER: PAGE 20 OF 103  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)  
**A. DANA A DILLON**

Mailing Address 322 DAKOTA ST

City State Zip Code  
 WEED CA 96094-2750

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 WEED UNION ELEMENTARY CLASSROOM TEACHER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 855.90

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 17 / 2014  
**Transaction ID : A2014-1492810**

Amount of Each Receipt this Period  
 184.10

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)  
**B. DEBORAH R DOUGLAS**

Mailing Address 7213 N PARK AVE

City State Zip Code  
 GLADSTONE MO 64118-2384

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 NORTH KANSAS CITY 74 CLASSROOM TEACHER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 12 / 2014  
**Transaction ID : A2014-1446308**

Amount of Each Receipt this Period  
 50.00

Full Name (Last, First, Middle Initial)  
**C. DEBORAH R DOUGLAS**

Mailing Address 7213 N PARK AVE

City State Zip Code  
 GLADSTONE MO 64118-2384

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 NORTH KANSAS CITY 74 CLASSROOM TEACHER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 12 / 2014  
**Transaction ID : A2014-1446309**

Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 284.10

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

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

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

FOR LINE NUMBER: PAGE 21 OF 103  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

**A. DEBORAH R DOUGLAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7213 N PARK AVE  
 City State Zip Code  
 GLADSTONE MO 64118-2384  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NORTH KANSAS CITY 74 CLASSROOM TEACHER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 12 / 2014  
**Transaction ID : A2014-1446310**  
 Amount of Each Receipt this Period  
 50.00

**B. DEBORAH R DOUGLAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7213 N PARK AVE  
 City State Zip Code  
 GLADSTONE MO 64118-2384  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NORTH KANSAS CITY 74 CLASSROOM TEACHER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 12 / 2014  
**Transaction ID : A2014-1446306**  
 Amount of Each Receipt this Period  
 50.00

**C. DEBORAH R DOUGLAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7213 N PARK AVE  
 City State Zip Code  
 GLADSTONE MO 64118-2384  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NORTH KANSAS CITY 74 CLASSROOM TEACHER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 12 / 2014  
**Transaction ID : A2014-1446307**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 150.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 22 OF 103  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)  
**A. ROXANNE M DOVE**

Mailing Address 4029 7TH ST S

City ARLINGTON State VA Zip Code 22204-1545

FEC ID number of contributing federal political committee. **C**

Name of Employer NATIONAL EDUCATION ASSOCIATION Occupation DIRECTOR

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **470.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 11 / 2014  
**Transaction ID : A2014-1474467**

Amount of Each Receipt this Period  
**100.00**

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)  
**B. BRIAN W DUNN**

Mailing Address 2231 CALIFORNIA ST NW  
 APT 507

City WASHINGTON State DC Zip Code 20008-3921

FEC ID number of contributing federal political committee. **C**

Name of Employer NATIONAL EDUCATION ASSOCIATION Occupation MANAGER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 11 / 2014  
**Transaction ID : A2014-1484622**

Amount of Each Receipt this Period  
**80.00**

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)  
**C. Robin Endris**

Mailing Address 835 FOREST ST

City MICHIGAN CITY State IN Zip Code 46360-2111

FEC ID number of contributing federal political committee. **C**

Name of Employer MICHIGAN CITY AREA SCHOOLS Occupation PARAEUCATOR OTHER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2014  
**Transaction ID : A2014-1449607**

Amount of Each Receipt this Period  
**200.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **380.00**

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

**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) | PAGE 23 OF 103  |
| <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 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

**A. Linda L Estrada**  
Full Name (Last, First, Middle Initial)  
Mailing Address 122 COLLINS ST  
City Donna State TX Zip Code 78537-2409  
FEC ID number of contributing federal political committee. **C**  
Name of Employer DONNA ISD Occupation SECRETARY/STENO  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **232.50**

Date of Receipt **06 / 23 / 2014**  
**Transaction ID : A2014-1463086**  
Amount of Each Receipt this Period **10.00**  
**PAYROLL DEDUCTION**

**B. ELEANOR J EVANS**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2217 VALLEY RD  
City OCEANSIDE State CA Zip Code 92056-3108  
FEC ID number of contributing federal political committee. **C**  
Name of Employer SAN DIEGO CITY UNIFIED Occupation CLASSROOM TEACHER  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **373.47**

Date of Receipt **06 / 17 / 2014**  
**Transaction ID : A2014-1493763**  
Amount of Each Receipt this Period **126.54**  
**PAYROLL DEDUCTION**

**C. OTTO FAJEN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 409 W BRIARWOOD LN  
City JEFFERSON CITY State MO Zip Code 65203-1609  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Missouri NEA Occupation LEGISLATIVE DIRECTOR  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **220.00**

Date of Receipt **06 / 27 / 2014**  
**Transaction ID : A2014-1471841**  
Amount of Each Receipt this Period **20.00**  
**PAYROLL DEDUCTION**

**SUBTOTAL** of Receipts This Page (optional)..... **156.54**  
**TOTAL** This Period (last page this line number only).....

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

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

FOR LINE NUMBER: PAGE 24 OF 103  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)  
**A. MARK D FARR**  
 Mailing Address PO BOX 451  
 City State Zip Code  
 HUTCHINSON KS 66601-0451  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NICKERSON CLASSROOM TEACHER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 05 / 2014  
**Transaction ID : A2014-1445198**  
 Amount of Each Receipt this Period  
 40.00

Full Name (Last, First, Middle Initial)  
**B. Richard J Fink**  
 Mailing Address 6626 KNOLLVIEW DR  
 City State Zip Code  
 Hudsonville MI 49426-9316  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 JENISON PUBLIC SCHOOLS EDUCATOR  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 17 / 2014  
**Transaction ID : A2014-1447675**  
 Amount of Each Receipt this Period  
 50.00

Full Name (Last, First, Middle Initial)  
**C. LINDA P FIRMAN**  
 Mailing Address 3930 WOODROW ST  
 City State Zip Code  
 ELLICOTT CITY MD 21043-5433  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HOWARD COUNTY PUBLIC SCHOOLS CLASSROOM TEACHER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 266.68

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 25 / 2014  
**Transaction ID : A2014-1542070**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 340.00  
**TOTAL** This Period (last page this line number only)..... ▶



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

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

FOR LINE NUMBER: PAGE 25 OF 103  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

**A. DARCEY J FLETCHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1244 SMITHVILLE RD  
 City WATERVILLE State VT Zip Code 05492-9576  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LAMOILLE UHSD 18 Occupation SPECIAL ED ASST  
 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  
 06 / 17 / 2014  
**Transaction ID : A2014-1447648**  
 Amount of Each Receipt this Period  
 200.00

**B. DARCEY J FLETCHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1244 SMITHVILLE RD  
 City WATERVILLE State VT Zip Code 05492-9576  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LAMOILLE UHSD 18 Occupation SPECIAL ED ASST  
 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  
 06 / 17 / 2014  
**Transaction ID : A2014-1447649**  
 Amount of Each Receipt this Period  
 200.00

**C. BRENT FULLINGTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1721 W WINCHESTER ST  
 City SPRINGFIELD State MO Zip Code 65807-4488  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SPRINGFIELD R-XII Occupation CLASSROOM TEACHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 12 / 2014  
**Transaction ID : A2014-1446353**  
 Amount of Each Receipt this Period  
 325.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 365.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

|   |                              |                              |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 26 OF 103               |
|   | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                 | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 12  |
|   |                              | <input type="checkbox"/> 15  |
|   |                              | <input type="checkbox"/> 16  |
|   |                              | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

**A. GAIL GONZALEZ**  
Full Name (Last, First, Middle Initial)

Mailing Address 33 NOB HILL ROAD

City MADISON State WI Zip Code 53713

FEC ID number of contributing federal political committee. **C**

Name of Employer Wisconsin Education Assn. Council Occupation Political Action Coordinator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 11 / 2014  
**Transaction ID : A2014-1495081**

Amount of Each Receipt this Period  
 100.00

PAYROLL DEDUCTION

**B. BARBARA L GRAY**  
Full Name (Last, First, Middle Initial)

Mailing Address 7709 TECUMSEH ST

City MILLINGTON State TN Zip Code 38053-3228

FEC ID number of contributing federal political committee. **C**

Name of Employer SHELBY COUNTY SCHOOL DISTRICT Occupation PRINCIPAL/ASST PRINCIPAL

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 09 / 2014  
**Transaction ID : A2014-1445352**

Amount of Each Receipt this Period  
 35.00

**C. BARBARA L GRAY**  
Full Name (Last, First, Middle Initial)

Mailing Address 7709 TECUMSEH ST

City MILLINGTON State TN Zip Code 38053-3228

FEC ID number of contributing federal political committee. **C**

Name of Employer SHELBY COUNTY SCHOOL DISTRICT Occupation PRINCIPAL/ASST PRINCIPAL

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 16 / 2014  
**Transaction ID : A2014-1447301**

Amount of Each Receipt this Period  
 35.00

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 170.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |        |

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

|   |                              |                              |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 27 OF 103               |
|   | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                 | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 12  |
|   |                              | <input type="checkbox"/> 16  |
|   |                              | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)  
**A. BARBARA L GRAY**

Mailing Address 7709 TECUMSEH ST

City MILLINGTON State TN Zip Code 38053-3228

FEC ID number of contributing federal political committee. **C**

Name of Employer SHELBY COUNTY SCHOOL DISTRICT Occupation PRINCIPAL/ASST PRINCIPAL

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **290.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**06 / 26 / 2014**

**Transaction ID : A2014-1448634**

Amount of Each Receipt this Period  
**300.00**

Full Name (Last, First, Middle Initial)  
**B. MOLLY M GREEN**

Mailing Address 7001 CHURCH AVE  
UNIT 61

City HIGHLAND State CA Zip Code 92346-4688

FEC ID number of contributing federal political committee. **C**

Name of Employer COLTON JOINT UNIFIED Occupation CLASSROOM TEACHER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **346.65**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**06 / 17 / 2014**

**Transaction ID : A2014-1507395**

Amount of Each Receipt this Period  
**153.34**

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)  
**C. CHRISTINE L GUNTHER**

Mailing Address PO BOX 1195

City LAKE SHERWOOD State MO Zip Code 63357-1195

FEC ID number of contributing federal political committee. **C**

Name of Employer FRANCIS HOWELL R-III Occupation PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**06 / 12 / 2014**

**Transaction ID : A2014-1446328**

Amount of Each Receipt this Period  
**100.00**

**SUBTOTAL** of Receipts This Page (optional)..... **283.34**

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

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

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

FOR LINE NUMBER: PAGE 28 OF 103  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

**A. CHRISTINE L GUNTHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 1195  
 City LAKE SHERWOOD State MO Zip Code 63357-1195  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FRANCIS HOWELL R-III Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 17 / 2014  
**Transaction ID : A2014-1447660**  
 Amount of Each Receipt this Period  
 250.00

**B. RITA HAECKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9407 TEA ROSE TRL  
 City AUSTIN State TX Zip Code 78748-5613  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer AUSTIN ISD Occupation CLASSROOM TEACHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 23 / 2014  
**Transaction ID : A2014-1456389**  
 Amount of Each Receipt this Period  
 30.00  
 PAYROLL DEDUCTION

**C. KENNETH B HAINES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11400 SEQUOIA LN  
 City BELTSVILLE State MD Zip Code 20705-1465  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PRINCE GEORGE COUNTY PUBLIC SCHOOL Occupation CLASSROOM TEACHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3795.05

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 16 / 2014  
**Transaction ID : A2014-1447372**  
 Amount of Each Receipt this Period  
 2700.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2755.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 29 OF 103  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

**A. KENNETH B HAINES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11400 SEQUOIA LN  
 City BELTSVILLE State MD Zip Code 20705-1465  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PRINCE GEORGE COUNTY PUBLIC SCHOOL Occupation CLASSROOM TEACHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3808.39

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 19 / 2014  
**Transaction ID : A2014-1460307**  
 Amount of Each Receipt this Period  
 13.34  
 PAYROLL DEDUCTION

**B. AMY D HALL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4843 CHICAGO AVE  
 City RIVERSIDE State CA Zip Code 92507-5857  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MORENO VALLEY UNIFIED Occupation CLASSROOM TEACHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 213.10

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 17 / 2014  
**Transaction ID : A2014-1481918**  
 Amount of Each Receipt this Period  
 136.90  
 PAYROLL DEDUCTION

**C. BRITT HALL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address S69W13499 BRISTLECONE LN  
 City MUSKEGO State WI Zip Code 53150-3331  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WAUKESHA COUNTY TECHNICAL COLLEGE Occupation TCHR/INSTRUCT/PRG ASST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 04 / 2014  
**Transaction ID : A2014-1444940**  
 Amount of Each Receipt this Period  
 2.50

**SUBTOTAL** of Receipts This Page (optional).....▶ 152.74  
**TOTAL** This Period (last page this line number only).....▶

**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)       | PAGE 30 OF 103               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   |   | <input type="checkbox"/> 15  |
|   |   | <input type="checkbox"/> 16  |
|   |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

**A. KECIA N HALL**  
Full Name (Last, First, Middle Initial)

Mailing Address 284 CRABTREE DR

City LEVITTOWN State PA Zip Code 19055-1650

FEC ID number of contributing federal political committee. **C**

Name of Employer Bensalem Township SD Occupation CLASSROOM TEACHER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
06 / 24 / 2014  
**Transaction ID : A2014-1448535**

Amount of Each Receipt this Period  
180.00

**B. KECIA N HALL**  
Full Name (Last, First, Middle Initial)

Mailing Address 284 CRABTREE DR

City LEVITTOWN State PA Zip Code 19055-1650

FEC ID number of contributing federal political committee. **C**

Name of Employer Bensalem Township SD Occupation CLASSROOM TEACHER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
06 / 24 / 2014  
**Transaction ID : A2014-1448536**

Amount of Each Receipt this Period  
180.00

**C. Mark D Hamilton**  
Full Name (Last, First, Middle Initial)

Mailing Address 103 Tabscott Ln

City Chapel Hill State NC Zip Code 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer CHAPEL HILL-CARRBORO SCHOOLS Occupation Counselor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 348.77

Date of Receipt  
06 / 17 / 2014  
**Transaction ID : A2014-1451490**

Amount of Each Receipt this Period  
151.23

PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 511.23

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

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

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

FOR LINE NUMBER: PAGE 31 OF 103  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

**A. KOLLEEN C HANETHO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 46W419 WOODVIEW PKWY  
 City State Zip Code  
 CARPENTERSVILLE IL 60140-8396  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 COMM UNIT SCH DIST 300 TEACHER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 17 / 2014  
**Transaction ID : A2014-1447673**  
 Amount of Each Receipt this Period  
 35.00

**B. KELLY A HANSSTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 514 W LOCUST ST  
 City State Zip Code  
 LODI CA 95240-1956  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 LODI SCH DIST CLASSROOM TEACHER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 350.30

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 17 / 2014  
**Transaction ID : A2014-1492781**  
 Amount of Each Receipt this Period  
 149.70  
 PAYROLL DEDUCTION

**C. REBECCA A HARPER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 699  
 City State Zip Code  
 PATTON CA 92369-0699  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SAN BERNARDINO CITY UNIFIED CLASSROOM TEACHER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 464.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 17 / 2014  
**Transaction ID : A2014-1492742**  
 Amount of Each Receipt this Period  
 135.50  
 PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 320.20  
**TOTAL** This Period (last page this line number only)..... ▶

**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)       | PAGE 32 OF 103               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

**A. ERIC HEINS**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 921

City SAN FRANCISCO State CA Zip Code 94011-0921

FEC ID number of contributing federal political committee. **C**

Name of Employer PITTSBURG UNIFIED Occupation CLASSROOM TEACHER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **342.40**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 17 / 2014**

**Transaction ID : A2014-1452516**

Amount of Each Receipt this Period  
**157.60**

**PAYROLL DEDUCTION**

**B. DAVID HELFMAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 1004 STONINGTON DR

City ARNOLD State MD Zip Code 21012-1658

FEC ID number of contributing federal political committee. **C**

Name of Employer MSTA Occupation EXECUTIVE DIRECTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.14**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 19 / 2014**

**Transaction ID : A2014-1491822**

Amount of Each Receipt this Period  
**41.69**

**PAYROLL DEDUCTION**

**C. CARMEN K HILL**  
Full Name (Last, First, Middle Initial)

Mailing Address 5317 WINSLOW DR

City SAINT LOUIS State MO Zip Code 63121-1425

FEC ID number of contributing federal political committee. **C**

Name of Employer ST LOUIS CITY Occupation REGISTERED NURSE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **245.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 12 / 2014**

**Transaction ID : A2014-1446334**

Amount of Each Receipt this Period  
**100.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **299.29**

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



**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)       | PAGE 33 OF 103               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   |   | <input type="checkbox"/> 15  |
|   |   | <input type="checkbox"/> 16  |
|   |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

**A. CARMEN K HILL**  
Full Name (Last, First, Middle Initial)  
Mailing Address 5317 WINSLOW DR  
City SAINT LOUIS State MO Zip Code 63121-1425  
FEC ID number of contributing federal political committee. **C**  
Name of Employer ST LOUIS CITY Occupation REGISTERED NURSE  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 12 / 2014  
**Transaction ID : A2014-1446335**  
Amount of Each Receipt this Period  
100.00

**B. WILLIAM M HOFFMANN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 186 EVELYNDALE DR  
City FELTON State DE Zip Code 19901-1823  
FEC ID number of contributing federal political committee. **C**  
Name of Employer COLONIAL SCHOOL DISTRICT Occupation TCHR/INSTRUCT/PRG ASST  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 347.60

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 13 / 2014  
**Transaction ID : A2014-1459306**  
Amount of Each Receipt this Period  
30.95  
PAYROLL DEDUCTION

**C. WILLIAM M HOFFMANN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 186 EVELYNDALE DR  
City FELTON State DE Zip Code 19901-1823  
FEC ID number of contributing federal political committee. **C**  
Name of Employer COLONIAL SCHOOL DISTRICT Occupation TCHR/INSTRUCT/PRG ASST  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 378.55

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 20 / 2014  
**Transaction ID : A2014-1459307**  
Amount of Each Receipt this Period  
30.95  
PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 161.90  
**TOTAL** This Period (last page this line number only).....▶

**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)       | PAGE 34 OF 103               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

**A. JANIE J HYDRICK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1370 N MADRID LN  
 City CHANDLER State AZ Zip Code 85226-1425  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MESA UNIFIED SCHOOL DISTRICT Occupation CLASSROOM TEACHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 17 / 2014  
**Transaction ID : A2014-1447679**  
 Amount of Each Receipt this Period  
 60.00

**B. TERRI L JACKSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 982 RUBY DR  
 City VACAVILLE State CA Zip Code 95687-7872  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WEST CONTRA COSTA UNIFIED Occupation CLASSROOM TEACHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 373.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 17 / 2014  
**Transaction ID : A2014-1492769**  
 Amount of Each Receipt this Period  
 127.00  
 PAYROLL DEDUCTION

**C. FREDERIKA S JENNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 745 OLD WILMINGTON RD  
 City HOCKESSIN State DE Zip Code 19707-9305  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RED CLAY CONSOLIDATED SCH DIST Occupation CLASSROOM TEACHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 553.02

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 13 / 2014  
**Transaction ID : A2014-1464656**  
 Amount of Each Receipt this Period  
 39.78  
 PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 226.78  
**TOTAL** This Period (last page this line number only)..... ▶

**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)       | PAGE 35 OF 103               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   |   | <input type="checkbox"/> 15  |
|   |   | <input type="checkbox"/> 16  |
|   |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

**A. FREDERIKA S JENNER**  
Full Name (Last, First, Middle Initial)

Mailing Address 745 OLD WILMINGTON RD

City HOCKESSIN State DE Zip Code 19707-9305

FEC ID number of contributing federal political committee. **C**

Name of Employer RED CLAY CONSOLIDATED SCH DIST Occupation CLASSROOM TEACHER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 592.80

Date of Receipt 06 / 20 / 2014  
**Transaction ID : A2014-1464657**

Amount of Each Receipt this Period 39.78

PAYROLL DEDUCTION

**B. DIXIE F JOHANSEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 450 HARVARD AVE APT 3B

City SANTA CLARA State CA Zip Code 95051-6449

FEC ID number of contributing federal political committee. **C**

Name of Employer RAVENSWOOD CITY ELEMENTARY Occupation CLASSROOM TEACHER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 352.40

Date of Receipt 06 / 17 / 2014  
**Transaction ID : A2014-1493059**

Amount of Each Receipt this Period 147.60

PAYROLL DEDUCTION

**C. Greg A Johnson**  
Full Name (Last, First, Middle Initial)

Mailing Address 11093 Folkstone Dr

City Yukon State OK Zip Code 73099-8051

FEC ID number of contributing federal political committee. **C**

Name of Employer MUSTANG Occupation TEACHER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 443.64

Date of Receipt 06 / 03 / 2014  
**Transaction ID : A2014-1444448**

Amount of Each Receipt this Period 90.91

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 278.29

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

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

|   |  |
|---|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 36 OF 103<br>(check only one)  |
|   | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12<br><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)  
**NEA Fund for Children and Public Education**

|  |   |
|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. SEAN P JOHNSON</b>  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>06 / 19 / 2014<br><b>Transaction ID : A2014-1483012</b> |
| Mailing Address 10055 PAGES CT   | Amount of Each Receipt this Period<br>41.69   |
| City State Zip Code<br>WHITE PLAINS MD 20695-2847  |   |
| FEC ID number of contributing federal political committee. <b>C</b>  | PAYROLL DEDUCTION   |
| Name of Employer Occupation<br>Maryland State Teachers Association GOVT RELATIONS DIRECTOR                                   |   |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| Aggregate Year-to-Date ▼<br>250.14   |   |

|  |   |
|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Jay M Jones</b>   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>06 / 17 / 2014<br><b>Transaction ID : A2014-1451348</b> |
| Mailing Address 6528 Dante Cir   | Amount of Each Receipt this Period<br>147.60  |
| City State Zip Code<br>Riverside CA 92506  |   |
| FEC ID number of contributing federal political committee. <b>C</b>  | PAYROLL DEDUCTION   |
| Name of Employer Occupation<br>SAN BERNARDINO CITY UNIFIED CLASSROOM TEACHER   |   |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| Aggregate Year-to-Date ▼<br>352.40   |   |

|  |   |
|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. MARK JONES</b>  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>06 / 13 / 2014<br><b>Transaction ID : A2014-1495790</b> |
| Mailing Address 1151 W AZOROS DR   | Amount of Each Receipt this Period<br>25.00   |
| City State Zip Code<br>COLUMBIA MO 65203-6619  |   |
| FEC ID number of contributing federal political committee. <b>C</b>  | PAYROLL DEDUCTION   |
| Name of Employer Occupation<br>Missouri NEA Political Director   |   |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| Aggregate Year-to-Date ▼<br>250.00   |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 214.29 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |        |

**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)       | PAGE 37 OF 103               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)  
**A. MARK JONES**

Mailing Address 1151 W AZOROS DR

City COLUMBIA State MO Zip Code 65203-6619

FEC ID number of contributing federal political committee. **C**

Name of Employer Missouri NEA Occupation Political Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 27 / 2014**

**Transaction ID : A2014-1495791**

Amount of Each Receipt this Period  
**25.00**

**PAYROLL DEDUCTION**

Full Name (Last, First, Middle Initial)  
**B. CYNTHIA R KAIN**

Mailing Address 1515 U STREET SE

City WASHINGTON State DC Zip Code 20020

FEC ID number of contributing federal political committee. **C**

Name of Employer NATIONAL EDUCATION ASSN Occupation PR Specialist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 11 / 2014**

**Transaction ID : A2014-1483681**

Amount of Each Receipt this Period  
**50.00**

**PAYROLL DEDUCTION**

Full Name (Last, First, Middle Initial)  
**C. PAMELA J KELLEY**

Mailing Address 2356 KUDU PL

City VENTURA State CA Zip Code 93003-7001

FEC ID number of contributing federal political committee. **C**

Name of Employer VENTURA UNIFIED SD Occupation UNKNOWN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.40**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 17 / 2014**

**Transaction ID : A2014-1485983**

Amount of Each Receipt this Period  
**149.60**

**PAYROLL DEDUCTION**

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | <b>224.60</b> |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |               |

**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)       | PAGE 38 OF 103               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   |   | <input type="checkbox"/> 15  |
|   |   | <input type="checkbox"/> 16  |
|   |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

**A. BETSY M KIPPERS**  
Full Name (Last, First, Middle Initial)

Mailing Address 41 POND VIEW WAY

City RACINE State WI Zip Code 53711-4954

FEC ID number of contributing federal political committee. **C**

Name of Employer RACINE SCH DIST Occupation CLASSROOM TEACHER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 13 / 2014  
**Transaction ID : A2014-1456522**

Amount of Each Receipt this Period  
 10.00

PAYROLL DEDUCTION

**B. BETSY M KIPPERS**  
Full Name (Last, First, Middle Initial)

Mailing Address 41 POND VIEW WAY

City RACINE State WI Zip Code 53711-4954

FEC ID number of contributing federal political committee. **C**

Name of Employer RACINE SCH DIST Occupation CLASSROOM TEACHER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2014  
**Transaction ID : A2014-1456523**

Amount of Each Receipt this Period  
 10.00

PAYROLL DEDUCTION

**C. SANDRA J KORTJOHN**  
Full Name (Last, First, Middle Initial)

Mailing Address 22436 BLUE LAKE CT SE

City YELM State WA Zip Code 98597-9377

FEC ID number of contributing federal political committee. **C**

Name of Employer YELM SD #2 Occupation CLASSROOM TEACHER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 906.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 21 / 2014  
**Transaction ID : A2014-1497255**

Amount of Each Receipt this Period  
 1.00

PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 21.00

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

**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)       | PAGE 39 OF 103               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

**A. AMY KURTZ**  
Full Name (Last, First, Middle Initial)

Mailing Address 5506 NEBRASKA AVE NW

City WASHINGTON State DC Zip Code 20015-1256

FEC ID number of contributing federal political committee. **C**

Name of Employer NATIONAL EDUCATION ASSOCIATION Occupation MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **640.00**

Date of Receipt  
**06 / 11 / 2014**  
Transaction ID : **A2014-1480039**

Amount of Each Receipt this Period  
**160.00**

**PAYROLL DEDUCTION**

**B. MARY KUSLER**  
Full Name (Last, First, Middle Initial)

Mailing Address 3215 N. COLUMBUS STREET

City Washington State VA Zip Code 22207

FEC ID number of contributing federal political committee. **C**

Name of Employer NEA Occupation DIRECTOR, GOVERNMENT RELATIONS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt  
**06 / 26 / 2014**  
Transaction ID : **A2014-1448641**

Amount of Each Receipt this Period  
**520.00**

**C. KELLY E LARNED**  
Full Name (Last, First, Middle Initial)

Mailing Address 15762 ROLLING RIDGE DR

City CHINO HILLS State CA Zip Code 91709-2991

FEC ID number of contributing federal political committee. **C**

Name of Employer CHINO VALLEY UNIF SD Occupation CLASSROOM TEACHER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **345.90**

Date of Receipt  
**06 / 17 / 2014**  
Transaction ID : **A2014-1501192**

Amount of Each Receipt this Period  
**154.10**

**PAYROLL DEDUCTION**

**SUBTOTAL** of Receipts This Page (optional)..... **834.10**

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

**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)       | PAGE 40 OF 103               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

**A. HARRY LAWSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 100 CRESCENT CENTER PKWY  
STE 260

City WASHINGTON State GA Zip Code 30084-7051

FEC ID number of contributing federal political committee. **C**

Name of Employer NATIONAL EDUCATION ASSOCIATION Occupation INTERIM REGIONAL DIRECTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  
06 / 11 / 2014  
Transaction ID : **A2014-1472005**

Amount of Each Receipt this Period  
200.00

PAYROLL DEDUCTION

**B. BECKY LESH**  
Full Name (Last, First, Middle Initial)

Mailing Address 3629 MARK RD

City WATERFORD State MI Zip Code 48328-2338

FEC ID number of contributing federal political committee. **C**

Name of Employer WATERFORD SCHOOL DISTRICT Occupation UNKNOWN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
06 / 17 / 2014  
Transaction ID : **A2014-1447669**

Amount of Each Receipt this Period  
25.00

**C. NICHOLE A LOYD DEVORE**  
Full Name (Last, First, Middle Initial)

Mailing Address 7510 25TH AVE

City SACRAMENTO State CA Zip Code 95820-6106

FEC ID number of contributing federal political committee. **C**

Name of Employer SACRAMENTO CITY UNIFIED Occupation CLASSROOM TEACHER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
979.60

Date of Receipt  
06 / 17 / 2014  
Transaction ID : **A2014-1489323**

Amount of Each Receipt this Period  
220.40

PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 445.40

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



**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)       | PAGE 41 OF 103               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

**A. KATHLEEN P LYONS**  
Full Name (Last, First, Middle Initial)

Mailing Address 1201 16TH ST NW  
STE 412

City WASHINGTON State DC Zip Code 20036-3201

FEC ID number of contributing federal political committee. **C**

Name of Employer NATIONAL EDUCATION ASSOCIATION Occupation REGIONAL DIRECTOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 342.00

Date of Receipt  
06 / 11 / 2014  
**Transaction ID : A2014-1459322**

Amount of Each Receipt this Period  
76.00

PAYROLL DEDUCTION

**B. LISA T MALLARD**  
Full Name (Last, First, Middle Initial)

Mailing Address 3220 WISCONSIN AVE NW  
APT 4

City WASHINGTON State DC Zip Code 20016-3851

FEC ID number of contributing federal political committee. **C**

Name of Employer NATIONAL EDUCATION ASSOCIATION Occupation EXECUTIVE ASSISTANT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
06 / 11 / 2014  
**Transaction ID : A2014-1477963**

Amount of Each Receipt this Period  
60.00

PAYROLL DEDUCTION

**C. Tammy L Mann-Fitzer**  
Full Name (Last, First, Middle Initial)

Mailing Address 15345 Yukon Ave

City Lawndale State CA Zip Code 90260

FEC ID number of contributing federal political committee. **C**

Name of Employer LAWDALE ELEMENTARY Occupation Classroom Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 262.40

Date of Receipt  
06 / 17 / 2014  
**Transaction ID : A2014-1451334**

Amount of Each Receipt this Period  
137.60

PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 273.60

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

**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)       | PAGE 42 OF 103               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

**A. QUENTIN C MARLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12334 CAMBRIA DR  
 City YUCAIPA State CA Zip Code 92399-1970  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer COLTON JOINT UNIFIED Occupation CLASSROOM TEACHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.65

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 17 / 2014  
**Transaction ID : A2014-1492777**  
 Amount of Each Receipt this Period  
 148.34  
 PAYROLL DEDUCTION

**B. DOUGLAS P MARQUES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 510 GERTRUDE AVE  
 City RICHMOND State CA Zip Code 94801-1947  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WEST CONTRA COSTA UNIFIED Occupation CLASSROOM TEACHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 373.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 17 / 2014  
**Transaction ID : A2014-1482535**  
 Amount of Each Receipt this Period  
 127.00  
 PAYROLL DEDUCTION

**C. TAMARA MAXIE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3611 E AVENUE D  
 City LOVINGTON State NM Zip Code 88260-9532  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LOVINGTON PUBLIC SCHOOLS Occupation CLASSROOM TEACHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 17 / 2014  
**Transaction ID : A2014-1447496**  
 Amount of Each Receipt this Period  
 100.00

|   |   |        |
|---|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | ▶ | 375.34 |
| <b>TOTAL</b> This Period (last page this line number only)..... | ▶ |        |

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

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

FOR LINE NUMBER: PAGE 43 OF 103  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

**A. DOREEN H MCGUIRE-GRIGG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2508 HOWARD AVE  
 City LAKEPORT State CA Zip Code 95453-6908  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LAKEPORT UNIFIED Occupation EDUCATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 254.21

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 17 / 2014  
**Transaction ID : A2014-1481913**  
 Amount of Each Receipt this Period  
 84.21  
 PAYROLL DEDUCTION

**B. MICHAEL G MCPHERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13123 RIVIERA TER  
 City SILVER SPRING State MD Zip Code 20904-3582  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NATIONAL EDUCATION ASSOCIATION Occupation CHIEF FINANCIAL OFFICER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 11 / 2014  
**Transaction ID : A2014-1451211**  
 Amount of Each Receipt this Period  
 80.00  
 PAYROLL DEDUCTION

**C. Ofira G Merkle**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Cmr 447 Box 53  
 City Apo State ZZ Zip Code 09154  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DEPT OF DEFENSE Occupation Classroom Teacher  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 17 / 2014  
**Transaction ID : A2014-1447674**  
 Amount of Each Receipt this Period  
 40.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 204.21  
**TOTAL** This Period (last page this line number only)..... ▶

**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)       | PAGE 44 OF 103               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   |   | <input type="checkbox"/> 15  |
|   |   | <input type="checkbox"/> 16  |
|   |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

**A. John G Mesicek**  
Full Name (Last, First, Middle Initial)

Mailing Address 1099 ORO RDG

City State Zip Code  
Palm Springs CA 92262-1256

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
PALM SPRINGS UNIFIED Classroom Teacher

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
797.40

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 17 / 2014  
**Transaction ID : A2014-1456164**

Amount of Each Receipt this Period  
202.60

PAYROLL DEDUCTION

**B. Katherine F Milano**  
Full Name (Last, First, Middle Initial)

Mailing Address 27 S BUCK RDG

City State Zip Code  
The Woodlands TX 77381-3857

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
UNASSIGNED EMPLOYER # TX90027 EDUCATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
202.50

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 23 / 2014  
**Transaction ID : A2014-1461066**

Amount of Each Receipt this Period  
8.75

PAYROLL DEDUCTION

**C. ERIC A MINORE**  
Full Name (Last, First, Middle Initial)

Mailing Address 2030 HAMPDEN RD

City State Zip Code  
FLINT MI 48503-4639

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SWARTZ CREEK COMMUNITY SCHOOLS EDUCATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
218.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 06 / 2014  
**Transaction ID : A2014-1456642**

Amount of Each Receipt this Period  
28.00

PAYROLL DEDUCTION

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 239.35 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |        |

**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)       | PAGE 45 OF 103               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

**A. ERIC A MINORE**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2030 HAMPDEN RD  
City FLINT State MI Zip Code 48503-4639  
FEC ID number of contributing federal political committee. **C**  
Name of Employer SWARTZ CREEK COMMUNITY SCHOOLS Occupation EDUCATOR  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **225.50**

Date of Receipt **06 / 30 / 2014**  
**Transaction ID : A2014-1456643**  
Amount of Each Receipt this Period **7.50**  
**PAYROLL DEDUCTION**

**B. PHILLIP MURRAY**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1540 LYNWOOD LN  
City POPLAR BLUFF State MO Zip Code 63901-2919  
FEC ID number of contributing federal political committee. **C**  
Name of Employer POPLAR BLUFF R-I Occupation CLASSROOM TEACHER  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **340.00**

Date of Receipt **06 / 12 / 2014**  
**Transaction ID : A2014-1446345**  
Amount of Each Receipt this Period **180.00**

**C. PHILLIP MURRAY**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1540 LYNWOOD LN  
City POPLAR BLUFF State MO Zip Code 63901-2919  
FEC ID number of contributing federal political committee. **C**  
Name of Employer POPLAR BLUFF R-I Occupation CLASSROOM TEACHER  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **350.00**

Date of Receipt **06 / 17 / 2014**  
**Transaction ID : A2014-1447546**  
Amount of Each Receipt this Period **10.00**

**SUBTOTAL** of Receipts This Page (optional)..... **197.50**  
**TOTAL** This Period (last page this line number only).....

**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)       | PAGE 46 OF 103               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   |   | <input type="checkbox"/> 15  |
|   |   | <input type="checkbox"/> 16  |
|   |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

|  |                                     |            |   |
|--|-------------------------------------|------------|---|
| Full Name (Last, First, Middle Initial)<br><b>A. TREENA MURRAY</b> |                                     |            | Date of Receipt   |
| Mailing Address 1540 LYNWOOD LN                                    |                                     |            | <input type="text" value="06"/> / <input type="text" value="12"/> / <input type="text" value="2014"/> |
| City   | State                               | Zip Code   | <b>Transaction ID : A2014-1446342</b>   |
| POPLAR BLUFF   | MO                                  | 63901-2919 | Amount of Each Receipt this Period  |
| FEC ID number of contributing federal political committee.         | <input type="text" value="C"/>      |            | <input type="text" value="180.00"/>   |
| Name of Employer   | Occupation                          |            |   |
| POPLAR BLUFF R-I   | CLASSROOM TEACHER                   |            |   |
| Receipt For:   | Aggregate Year-to-Date ▼            |            |   |
| <input type="checkbox"/> Primary <input type="checkbox"/> General  | <input type="text" value="300.00"/> |            |   |
| <input type="checkbox"/> Other (specify) ▼                         |                                     |            |   |

|  |                                     |            |   |
|--|-------------------------------------|------------|---|
| Full Name (Last, First, Middle Initial)<br><b>B. TREENA MURRAY</b> |                                     |            | Date of Receipt   |
| Mailing Address 1540 LYNWOOD LN                                    |                                     |            | <input type="text" value="06"/> / <input type="text" value="17"/> / <input type="text" value="2014"/> |
| City   | State                               | Zip Code   | <b>Transaction ID : A2014-1447540</b>   |
| POPLAR BLUFF   | MO                                  | 63901-2919 | Amount of Each Receipt this Period  |
| FEC ID number of contributing federal political committee.         | <input type="text" value="C"/>      |            | <input type="text" value="10.00"/>  |
| Name of Employer   | Occupation                          |            |   |
| POPLAR BLUFF R-I   | CLASSROOM TEACHER                   |            |   |
| Receipt For:   | Aggregate Year-to-Date ▼            |            |   |
| <input type="checkbox"/> Primary <input type="checkbox"/> General  | <input type="text" value="310.00"/> |            |   |
| <input type="checkbox"/> Other (specify) ▼                         |                                     |            |   |

|   |                                     |            |   |
|---|-------------------------------------|------------|---|
| Full Name (Last, First, Middle Initial)<br><b>C. MICHAEL B MUSSER</b> |                                     |            | Date of Receipt   |
| Mailing Address 9508 SANTA MARIA ST                                   |                                     |            | <input type="text" value="06"/> / <input type="text" value="17"/> / <input type="text" value="2014"/> |
| City  | State                               | Zip Code   | <b>Transaction ID : A2014-1493065</b>   |
| VENTURA   | CA                                  | 93004-1738 | Amount of Each Receipt this Period  |
| FEC ID number of contributing federal political committee.            | <input type="text" value="C"/>      |            | <input type="text" value="136.90"/>   |
| Name of Employer  | Occupation                          |            |   |
| VENTURA UNIFIED SD  | UNKNOWN                             |            |   |
| Receipt For:  | Aggregate Year-to-Date ▼            |            |   |
| <input type="checkbox"/> Primary <input type="checkbox"/> General     | <input type="text" value="263.10"/> |            | PAYROLL DEDUCTION   |
| <input type="checkbox"/> Other (specify) ▼                            |                                     |            |   |

|  |                                     |
|--|-------------------------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | <input type="text" value="326.90"/> |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | <input type="text"/>                |

**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)       | PAGE 47 OF 103               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

**A. LISA NENTL-BLOOM**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6149 SIOUX TRL

|   |   |                        |
|---|---|------------------------|
| City<br>NORTH BRANCH  | State<br>MN                               | Zip Code<br>55056-6945 |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |   |                        |
| Name of Employer<br>NATIONAL EDUCATION ASSOCIATION  | Occupation<br>ORGANIZATION SPECIALIST     |                        |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><b>452.50</b> |                        |

Date of Receipt  
**06 / 11 / 2014**  
Transaction ID : **A2014-1485956**

Amount of Each Receipt this Period  
**100.00**

PAYROLL DEDUCTION

**B. JOSEPH E PALUBA III**  
Full Name (Last, First, Middle Initial)  
Mailing Address 12091 SPANISH OAKS CT

|   |   |                        |
|---|---|------------------------|
| City<br>VICTORVILLE   | State<br>CA                               | Zip Code<br>92392-1260 |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |   |                        |
| Name of Employer<br>RIALTO UNIFIED  | Occupation<br>CLASSROOM TEACHER           |                        |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><b>340.70</b> |                        |

Date of Receipt  
**06 / 17 / 2014**  
Transaction ID : **A2014-1497611**

Amount of Each Receipt this Period  
**159.30**

PAYROLL DEDUCTION

**C. BETTY L PATTERSON**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4708 CAMINO DOS VIDOS

|   |   |                   |
|---|---|-------------------|
| City<br>LAS CRUCES  | State<br>NM                               | Zip Code<br>88012 |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |   |                   |
| Name of Employer<br>LAS CRUCES PUBLIC SCHOOLS   | Occupation<br>TEACHER                     |                   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><b>230.00</b> |                   |

Date of Receipt  
**06 / 17 / 2014**  
Transaction ID : **A2014-1447492**

Amount of Each Receipt this Period  
**50.00**

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | <b>309.30</b> |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |               |

**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)       | PAGE 48 OF 103               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   |   | <input type="checkbox"/> 15  |
|   |   | <input type="checkbox"/> 16  |
|   |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

**A. BETTY L PATTERSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 4708 CAMINO DOS VIDOS

City LAS CRUCES State NM Zip Code 88012

FEC ID number of contributing federal political committee. **C**

Name of Employer LAS CRUCES PUBLIC SCHOOLS Occupation TEACHER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
06 / 17 / 2014  
**Transaction ID : A2014-1447454**

Amount of Each Receipt this Period  
25.00

**B. MELANIE D PERKINS**  
Full Name (Last, First, Middle Initial)

Mailing Address 1920 MAGNOLIA WAY

City WALNUT CREEK State CA Zip Code 94595-1715

FEC ID number of contributing federal political committee. **C**

Name of Employer WEST CONTRA COSTA UNIFIED Occupation CLASSROOM TEACHER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 373.00

Date of Receipt  
06 / 17 / 2014  
**Transaction ID : A2014-1492825**

Amount of Each Receipt this Period  
127.00

PAYROLL DEDUCTION

**C. James Politis**  
Full Name (Last, First, Middle Initial)

Mailing Address 8508 PLUM CREEK DR

City Gaithersburg State MD Zip Code 20882-4439

FEC ID number of contributing federal political committee. **C**

Name of Employer MONTGOMERY COUNTY PUBLIC SCHOOLS Occupation Classroom Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 216.77

Date of Receipt  
06 / 19 / 2014  
**Transaction ID : A2014-1465914**

Amount of Each Receipt this Period  
28.36

PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 180.36

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



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

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

FOR LINE NUMBER: PAGE 49 OF 103  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)  
**A. MARC C POLLITT**

Mailing Address **PO BOX 6690**

City **CRESTLINE** State **CA** Zip Code **92325-6690**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SAN BERNARDINO CITY UNIFIED** Occupation **CLASSROOM TEACHER**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **244.50**

Date of Receipt  
**06 / 17 / 2014**  
**Transaction ID : A2014-1481909**

Amount of Each Receipt this Period  
**115.50**

**PAYROLL DEDUCTION**

Full Name (Last, First, Middle Initial)  
**B. Andrea Prejean**

Mailing Address **3318 Hampton Point Dr Apt D**

City **Silver Spring** State **MD** Zip Code **20904**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NATIONAL EDUCATION ASSOCIATION** Occupation **DIRECTOR**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
**06 / 17 / 2014**  
**Transaction ID : A2014-1447676**

Amount of Each Receipt this Period  
**50.00**

Full Name (Last, First, Middle Initial)  
**C. Alicia A Priest**

Mailing Address **608 JOHN F KROUTIL DR**

City **Yukon** State **OK** Zip Code **73099-5329**

FEC ID number of contributing federal political committee. **C**

Name of Employer **YUKON** Occupation **Classroom Teacher**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **208.35**

Date of Receipt  
**06 / 03 / 2014**  
**Transaction ID : A2014-1444447**

Amount of Each Receipt this Period  
**41.67**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **207.17**

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

**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)       | PAGE 50 OF 103               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

**A. CARRIE PUGH**  
Full Name (Last, First, Middle Initial)  
Mailing Address 416 4TH ST SE  
City WASHINGTON State DC Zip Code 20003-2005  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NATIONAL EDUCATION ASSOCIATION Occupation MANAGER  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **405.00**

Date of Receipt **06 / 11 / 2014**  
**Transaction ID : A2014-1482814**  
Amount of Each Receipt this Period **90.00**  
**PAYROLL DEDUCTION**

**B. BILL RAABE**  
Full Name (Last, First, Middle Initial)  
Mailing Address 907 6TH ST SW # 811B  
City WASHINGTON State DC Zip Code 20024-3854  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NATIONAL EDUCATION ASSOCIATION Occupation DIRECTOR  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **800.00**

Date of Receipt **06 / 11 / 2014**  
**Transaction ID : A2014-1467237**  
Amount of Each Receipt this Period **200.00**  
**PAYROLL DEDUCTION**

**C. JANE RAHN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 7756 CLAUDE AVE  
City DAYTON State OH Zip Code 45414-1845  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation RETIRED  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **274.40**

Date of Receipt **06 / 13 / 2014**  
**Transaction ID : A2014-1446634**  
Amount of Each Receipt this Period **2.00**

**SUBTOTAL** of Receipts This Page (optional)..... **292.00**  
**TOTAL** This Period (last page this line number only).....

**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)       | PAGE 51 OF 103               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

**A. RICHARD RAZO**  
Full Name (Last, First, Middle Initial)

Mailing Address 82326 SUNAIRE CT

City INDIO State CA Zip Code 92201-6870

FEC ID number of contributing federal political committee. **C**

Name of Employer COACHELLA VALLEY UNIFIED Occupation CLASSROOM TEACHER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.75**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**06 / 17 / 2014**

**Transaction ID : A2014-1467409**

Amount of Each Receipt this Period  
**124.25**

**PAYROLL DEDUCTION**

**B. CARLOS F RICO**  
Full Name (Last, First, Middle Initial)

Mailing Address 2816 RIVERSIDE BLVD

City SACRAMENTO State CA Zip Code 95818-3356

FEC ID number of contributing federal political committee. **C**

Name of Employer SACRAMENTO CITY UNIFIED Occupation INSTRUCTIONAL SPECIALIST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **817.60**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**06 / 17 / 2014**

**Transaction ID : A2014-1462076**

Amount of Each Receipt this Period  
**202.40**

**PAYROLL DEDUCTION**

**C. Karla Roberts**  
Full Name (Last, First, Middle Initial)

Mailing Address 2274 Kittridge Ct

City Chesterfield State MO Zip Code 63017

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**06 / 12 / 2014**

**Transaction ID : A2014-1446352**

Amount of Each Receipt this Period  
**300.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **626.65**

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

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

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

FOR LINE NUMBER: PAGE 52 OF 103  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

**A. EDWIN R ROBINS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 23 HIGHGROVE CT  
 City O FALLON State MO Zip Code 63366  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PATTONVILLE R-III Occupation CLASSROOM TEACHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 12 / 2014  
**Transaction ID : A2014-1446322**  
 Amount of Each Receipt this Period  
 100.00

**B. EDWIN R ROBINS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 23 HIGHGROVE CT  
 City O FALLON State MO Zip Code 63366  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PATTONVILLE R-III Occupation CLASSROOM TEACHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 12 / 2014  
**Transaction ID : A2014-1446323**  
 Amount of Each Receipt this Period  
 100.00

**C. EDWIN R ROBINS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 23 HIGHGROVE CT  
 City O FALLON State MO Zip Code 63366  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PATTONVILLE R-III Occupation CLASSROOM TEACHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 12 / 2014  
**Transaction ID : A2014-1446324**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 300.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 53 OF 103  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

**A. EDWIN R ROBINS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 23 HIGHGROVE CT  
 City O FALLON State MO Zip Code 63366  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PATTONVILLE R-III Occupation CLASSROOM TEACHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 12 / 2014  
**Transaction ID : A2014-1446321**  
 Amount of Each Receipt this Period  
 100.00

**B. ROBERT RODRIGUEZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5719 STOVER AVE  
 City RIVERSIDE State CA Zip Code 92505-1257  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SAN BERNARDINO CITY UNIFIED Occupation CLASSROOM TEACHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 427.84

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 17 / 2014  
**Transaction ID : A2014-1471885**  
 Amount of Each Receipt this Period  
 127.17  
 PAYROLL DEDUCTION

**C. GREGORY C ROY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15151 AMSO ST  
 City POWAY State CA Zip Code 92064-2603  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SAN DIEGO CITY UNIFIED Occupation CLASSROOM TEACHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.97

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 17 / 2014  
**Transaction ID : A2014-1496715**  
 Amount of Each Receipt this Period  
 114.04  
 PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 341.21  
**TOTAL** This Period (last page this line number only)..... ▶

**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)       | PAGE 54 OF 103               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   |   | <input type="checkbox"/> 15  |
|   |   | <input type="checkbox"/> 16  |
|   |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

**A. MELISSA D ROY**  
Full Name (Last, First, Middle Initial)

Mailing Address 7811 EADS AVE  
UNIT 104

City LA JOLLA State CA Zip Code 92037-4214

FEC ID number of contributing federal political committee. **C**

Name of Employer SAN DIEGO CITY UNIFIED Occupation CLASSROOM TEACHER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
235.97

Date of Receipt  
06 / 17 / 2014  
Transaction ID : **A2014-1495724**

Amount of Each Receipt this Period  
114.04

PAYROLL DEDUCTION

**B. TRISH RUIZ**  
Full Name (Last, First, Middle Initial)

Mailing Address 2718 N JADE AVE

City HOBBS State NM Zip Code 88240-1901

FEC ID number of contributing federal political committee. **C**

Name of Employer HOBBS MUNICIPAL SCHOOLS Occupation COUNSELOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
405.00

Date of Receipt  
06 / 17 / 2014  
Transaction ID : **A2014-1447497**

Amount of Each Receipt this Period  
100.00

**C. TRISH RUIZ**  
Full Name (Last, First, Middle Initial)

Mailing Address 2718 N JADE AVE

City HOBBS State NM Zip Code 88240-1901

FEC ID number of contributing federal political committee. **C**

Name of Employer HOBBS MUNICIPAL SCHOOLS Occupation COUNSELOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
405.00

Date of Receipt  
06 / 17 / 2014  
Transaction ID : **A2014-1447397**

Amount of Each Receipt this Period  
5.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 219.04

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

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

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

FOR LINE NUMBER: PAGE 55 OF 103  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

**A. JACQUELYN W SETTLAGE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2 GRIM CT S  
 UNIT 1065  
 City KIRKSVILLE State MO Zip Code 63501-4435  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Retired RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 12 / 2014  
**Transaction ID : A2014-1446355**  
 Amount of Each Receipt this Period  
 500.00

**B. John H Settlege**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2 S Grim Ct  
 City Kirksville State MO Zip Code 63501  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Retired Retired  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 12 / 2014  
**Transaction ID : A2014-1446354**  
 Amount of Each Receipt this Period  
 500.00

**C. DEWAYNE T SHEAFFER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5242 MINTURN AVE  
 City LAKEWOOD State CA Zip Code 90712-2312  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 LONG BEACH CITY COLLEGE UNKNOWN  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 352.90

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 17 / 2014  
**Transaction ID : A2014-1474108**  
 Amount of Each Receipt this Period  
 147.10  
 PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1147.10  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 56 OF 103  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

**A. MICHELLE SHEPARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4908 FORUM BLVD  
 City COLUMBIA State MO Zip Code 65203-5648  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer COLUMBIA PUBLIC SHCOOLS Occupation PARAEducator OTHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 06 / 12 / 2014  
**Transaction ID : A2014-1446340**  
 Amount of Each Receipt this Period 150.00

**B. MICHELLE SHEPARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4908 FORUM BLVD  
 City COLUMBIA State MO Zip Code 65203-5648  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer COLUMBIA PUBLIC SHCOOLS Occupation PARAEducator OTHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt 06 / 17 / 2014  
**Transaction ID : A2014-1447639**  
 Amount of Each Receipt this Period 20.00

**C. JOHN C STOCKS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1201 16TH ST NW  
 City WASHINGTON State DC Zip Code 20036-3201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NATIONAL EDUCATION ASSOCIATION Occupation EXECUTIVE DIRECTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1520.00

Date of Receipt 06 / 11 / 2014  
**Transaction ID : A2014-1465050**  
 Amount of Each Receipt this Period 380.00  
 PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 550.00  
**TOTAL** This Period (last page this line number only)..... ▶



**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)       | PAGE 57 OF 103               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   |   | <input type="checkbox"/> 15  |
|   |   | <input type="checkbox"/> 16  |
|   |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

**A. CHARLOTTE SVOLOS**  
Full Name (Last, First, Middle Initial)

Mailing Address 2125 W 187TH ST

City TORRANCE State CA Zip Code 90504-6101

FEC ID number of contributing federal political committee. **C**

Name of Employer TORRANCE UNIFIED Occupation EDUCATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **349.90**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 17 / 2014**

**Transaction ID : A2014-1471985**

Amount of Each Receipt this Period  
**150.10**

PAYROLL DEDUCTION

**B. KURT SWANSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 22707 E 41ST TER S

City INDEPENDENCE State MO Zip Code 64015-7901

FEC ID number of contributing federal political committee. **C**

Name of Employer Missouri NEA Occupation UniServ Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 27 / 2014**

**Transaction ID : A2014-1456185**

Amount of Each Receipt this Period  
**20.00**

PAYROLL DEDUCTION

**C. SHARON M SWANSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 4355 S NATIONAL AVE

City SPRINGFIELD State MO Zip Code 65810-2687

FEC ID number of contributing federal political committee. **C**

Name of Employer Missouri NEA Occupation UniServ Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 13 / 2014**

**Transaction ID : A2014-1492955**

Amount of Each Receipt this Period  
**25.00**

PAYROLL DEDUCTION

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | <b>195.10</b> |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |               |

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

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

FOR LINE NUMBER: PAGE 58 OF 103  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

**A. SHARON M SWANSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4355 S NATIONAL AVE  
 City Springfield State MO Zip Code 65810-2687  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Missouri NEA Occupation UniServ Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 06 / 27 / 2014  
**Transaction ID : A2014-1492956**  
 Amount of Each Receipt this Period 25.00  
 PAYROLL DEDUCTION

**B. JANE A SYKES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4355 MARYLAND AVE APT 322  
 City Saint Louis State MO Zip Code 63108-2766  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ST LOUIS CITY Occupation REGISTERED NURSE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 06 / 12 / 2014  
**Transaction ID : A2014-1446182**  
 Amount of Each Receipt this Period 100.00

**C. JANE A SYKES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4355 MARYLAND AVE APT 322  
 City Saint Louis State MO Zip Code 63108-2766  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ST LOUIS CITY Occupation REGISTERED NURSE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 06 / 12 / 2014  
**Transaction ID : A2014-1446183**  
 Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 225.00  
**TOTAL** This Period (last page this line number only)..... ▶

**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)       | PAGE 59 OF 103               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

**A. CAROL TEWELEIT**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2334 UNION AVE

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>ALAMOGORDO | State<br>NM | Zip Code<br>88310-3847 |
|--------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

|   |                        |
|---|------------------------|
| Name of Employer<br>ALAMOGORDO PUBLIC SCHOOLS | Occupation<br>EDUCATOR |
|---|------------------------|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **353.00**

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    | / | 17    | / | 2014        |

**Transaction ID : A2014-1447435**

Amount of Each Receipt this Period  

|        |
|--------|
| 170.00 |
|--------|

**20.00**

**B. CAROL TEWELEIT**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2334 UNION AVE

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>ALAMOGORDO | State<br>NM | Zip Code<br>88310-3847 |
|--------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

|   |                        |
|---|------------------------|
| Name of Employer<br>ALAMOGORDO PUBLIC SCHOOLS | Occupation<br>EDUCATOR |
|---|------------------------|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **353.00**

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    | / | 17    | / | 2014        |

**Transaction ID : A2014-1447494**

Amount of Each Receipt this Period  

|        |
|--------|
| 100.00 |
|--------|

**100.00**

**C. TANYA THOMAS-COATS**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1734 WOODHAVEN DR

|                   |             |                        |
|-------------------|-------------|------------------------|
| City<br>KNOXVILLE | State<br>TN | Zip Code<br>37914-2954 |
|-------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

|   |                                 |
|---|---------------------------------|
| Name of Employer<br>KNOX COUNTY SCHOOL DISTRICT | Occupation<br>CLASSROOM TEACHER |
|---|---------------------------------|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    | / | 16    | / | 2014        |

**Transaction ID : A2014-1447346**

Amount of Each Receipt this Period  

|       |
|-------|
| 50.00 |
|-------|

**50.00**

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | <b>170.00</b> |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |               |

**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)       | PAGE 60 OF 103               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

**A. BILL E THOMPSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 1201 16TH ST NW

City MANASSAS State DC Zip Code 20036-3201

FEC ID number of contributing federal political committee. **C**

Name of Employer NATIONAL EDUCATION ASSOCIATION Occupation DIRECTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
06 / 11 / 2014  
**Transaction ID : A2014-1453184**

Amount of Each Receipt this Period  
80.00

PAYROLL DEDUCTION

**B. KATHERINE L UNDERWOOD**  
Full Name (Last, First, Middle Initial)

Mailing Address 27337 ARLA ST

City MORENO VALLEY State CA Zip Code 92555-4945

FEC ID number of contributing federal political committee. **C**

Name of Employer MORENO VALLEY UNIFIED Occupation CLASSROOM TEACHER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 308.10

Date of Receipt  
06 / 17 / 2014  
**Transaction ID : A2014-1493031**

Amount of Each Receipt this Period  
146.90

PAYROLL DEDUCTION

**C. CHRISTINA URIBE**  
Full Name (Last, First, Middle Initial)

Mailing Address 3175 TEXAS ST

City OAKLAND State CA Zip Code 94602-2838

FEC ID number of contributing federal political committee. **C**

Name of Employer NATIONAL EDUCATION ASSOCIATION Occupation MANAGER D

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 405.00

Date of Receipt  
06 / 11 / 2014  
**Transaction ID : A2014-1493394**

Amount of Each Receipt this Period  
90.00

PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 316.90

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

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

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

FOR LINE NUMBER: PAGE 61 OF 103  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)  
**A. KENDALL A VAUGHT**  
 Mailing Address 8231 FLAXMAN DR  
 City State Zip Code  
 HUNTINGTON BEACH CA 92646-3822  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 LOS ALAMITOS UNIFIED CLASSROOM TEACHER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 264.90

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 17 / 2014  
**Transaction ID : A2014-1492816**  
 Amount of Each Receipt this Period  
 135.10  
 PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)  
**B. DEAN E VOGEL**  
 Mailing Address PO BOX 921  
 City State Zip Code  
 DAVIS CA 94011-0921  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 VACAVILLE UNIFIED CLASSROOM TEACHER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 352.20

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 17 / 2014  
**Transaction ID : A2014-1451311**  
 Amount of Each Receipt this Period  
 147.80  
 PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)  
**C. SUSAN WAGNER**  
 Mailing Address 1231 JAMES ST  
 City State Zip Code  
 Carthage MO 64836-3824  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Missouri NEA UniServ Director  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 13 / 2014  
**Transaction ID : A2014-1471888**  
 Amount of Each Receipt this Period  
 45.00  
 PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 327.90  
**TOTAL** This Period (last page this line number only)..... ▶

**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)       | PAGE 62 OF 103               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   |   | <input type="checkbox"/> 15  |
|   |   | <input type="checkbox"/> 16  |
|   |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

**A. SUSAN WAGNER**  
Full Name (Last, First, Middle Initial)

Mailing Address 1231 JAMES ST

City Carthage State MO Zip Code 64836-3824

FEC ID number of contributing federal political committee. **C**

Name of Employer Missouri NEA Occupation UniServ Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **495.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 27 / 2014**

**Transaction ID : A2014-1471889**

Amount of Each Receipt this Period  
**45.00**

**PAYROLL DEDUCTION**

**B. BRIAN WASHINGTON**  
Full Name (Last, First, Middle Initial)

Mailing Address 1201 16TH ST NW

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C**

Name of Employer NATIONAL EDUCATION ASSOCIATION Occupation SENIOR PRESS OFFICER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 11 / 2014**

**Transaction ID : A2014-1492406**

Amount of Each Receipt this Period  
**50.00**

**PAYROLL DEDUCTION**

**C. ANNA L WATKINS**  
Full Name (Last, First, Middle Initial)

Mailing Address 8501 BEAR CREEK RD

City ALEDO State TX Zip Code 76008-4005

FEC ID number of contributing federal political committee. **C**

Name of Employer FORT WORTH ISD Occupation EDUCATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **397.50**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 23 / 2014**

**Transaction ID : A2014-1463088**

Amount of Each Receipt this Period  
**8.75**

**PAYROLL DEDUCTION**

**SUBTOTAL** of Receipts This Page (optional)..... ► **103.75**

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

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

|   |                              |                              |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 63 OF 103               |
|   | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                 | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 12  |
|   |                              | <input type="checkbox"/> 15  |
|   |                              | <input type="checkbox"/> 16  |
|   |                              | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

**A. Joni R Watson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2432 Westlawn Dr  
 City Dayton State OH Zip Code 45440-2039  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DAYTON CITY SD Occupation EDUCATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 204.00

Date of Receipt 06 / 30 / 2014  
**Transaction ID : A2014-1463410**  
 Amount of Each Receipt this Period 200.00  
 PAYROLL DEDUCTION

**B. MAYROSE C WEGMANN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1209 13TH ST NW APT 404  
 City WASHINGTON State DC Zip Code 20005-5262  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NATIONAL EDUCATION ASSOCIATION Occupation ORGANIZATION SPECIALIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 06 / 11 / 2014  
**Transaction ID : A2014-1479737**  
 Amount of Each Receipt this Period 80.00  
 PAYROLL DEDUCTION

**C. ELIZABETH H WELLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 216 DUKE OF KENT ST  
 City CHESTERTOWN State MD Zip Code 21620-2854  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Maryland State Teachers Association Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 283.52

Date of Receipt 06 / 19 / 2014  
**Transaction ID : A2014-1460288**  
 Amount of Each Receipt this Period 50.04  
 PAYROLL DEDUCTION

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 330.04 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |        |

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

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

FOR LINE NUMBER: PAGE 64 OF 103  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)  
**A. KAREN M WHITE**

Mailing Address 1334 WALNUT AVE

City State Zip Code  
 ANNAPOLIS MD 21403-4767

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 NATIONAL EDUCATION ASSOCIATION DIRECTOR

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 800.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 11 / 2014  
**Transaction ID : A2014-1482815**

Amount of Each Receipt this Period  
 200.00

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)  
**B. DANILLE D YOUNG**

Mailing Address PO BOX 124

City State Zip Code  
 FARMINGTON NM 87499-0124

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 FMS-PIEDRA VISTA HIGH FMS-PIEDRA VISTA HIGH

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 510.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 17 / 2014  
**Transaction ID : A2014-1447493**

Amount of Each Receipt this Period  
 75.00

Full Name (Last, First, Middle Initial)  
**C. DANILLE D YOUNG**

Mailing Address PO BOX 124

City State Zip Code  
 FARMINGTON NM 87499-0124

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 FMS-PIEDRA VISTA HIGH FMS-PIEDRA VISTA HIGH

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 510.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 17 / 2014  
**Transaction ID : A2014-1447455**

Amount of Each Receipt this Period  
 25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 300.00

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



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

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

FOR LINE NUMBER: PAGE 65 OF 103  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

**A.** Full Name (Last, First, Middle Initial)  
**DANILLE D YOUNG**

Mailing Address **PO BOX 124**

City **FARMINGTON** State **NM** Zip Code **87499-0124**

FEC ID number of contributing federal political committee. **C**

Name of Employer **FMS-PIEDRA VISTA HIGH** Occupation **FMS-PIEDRA VISTA HIGH**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **510.00**

Date of Receipt  
**06 / 17 / 2014**  
**Transaction ID : A2014-1447574**

Amount of Each Receipt this Period  
**10.00**

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

|  |                 |
|--|-----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | <b>10.00</b>    |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | <b>20315.36</b> |

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. Manufacturers & Traders Trust Co.**

Mailing Address 40 East Pratt St.

City Baltimore State MD Zip Code 21202

Purpose of Disbursement  
Bank Service Charge

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 0 | 2 |   | 2 | 0 | 1 | 4 |

Transaction ID : B507098

Amount of Each Disbursement this Period

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| 4 | 2 | 1 | . | 7 | 1 |
|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

**B. Manufacturers & Traders Trust Co.**

Mailing Address 40 East Pratt St.

City Baltimore State MD Zip Code 21202

Purpose of Disbursement  
Bank Service Charge

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 0 | 5 |   | 2 | 0 | 1 | 4 |

Transaction ID : B507099

Amount of Each Disbursement this Period

|   |   |   |   |   |
|---|---|---|---|---|
| 5 | 5 | . | 5 | 9 |
|---|---|---|---|---|

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|---|---|

Amount of Each Disbursement this Period

|  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| 4 | 7 | 7 | . | 3 | 0 |
|---|---|---|---|---|---|

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| 4 | 7 | 7 | . | 3 | 0 |
|---|---|---|---|---|---|

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. Patrick Henry Hays for Congress**

Mailing Address P. O. Box 94886

City North Little Rock State AR Zip Code 72190

Purpose of Disbursement  
Contribution

011

Candidate Name

**Patrick H Hays**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: AR District: 02

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    | / | 24    | / | 2014      |

**Transaction ID : B499337**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Full Name (Last, First, Middle Initial)

**B. Ron Barber for Congress**

Mailing Address PO Box 57715

City Tucson State AZ Zip Code 85732

Purpose of Disbursement  
Contribution

011

Candidate Name

**Ron Barber**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: AZ District: 02

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    | / | 24    | / | 2014      |

**Transaction ID : B499335**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Full Name (Last, First, Middle Initial)

**C. A Whole Lot of People for Grijalva Congress Cmte**

Mailing Address PO Box 1242

City Tucson State AZ Zip Code 85702

Purpose of Disbursement  
Contribution

011

Candidate Name

**Raul M Grijalva**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: AZ District: 03

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    | / | 24    | / | 2014      |

**Transaction ID : B499336**

Amount of Each Disbursement this Period

|         |
|---------|
| 4500.00 |
|---------|

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

|          |
|----------|
| 14500.00 |
|----------|

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

|  |
|--|
|  |
|--|

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. Kirkpatrick for Arizona**

Mailing Address PO Box 12011

City State Zip Code  
Casa Grande AZ 85130

Purpose of Disbursement  
Contribution

011

Candidate Name

**Ann Kirkpatrick**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: AZ District: 01

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 4 |   | 2 | 0 | 1 | 4 |

**Transaction ID : B499334**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

**B. Pete Aguilar for Congress**

Mailing Address PO Box 10954

City State Zip Code  
San Bernadino CA 92423

Purpose of Disbursement  
Contribution

011

Candidate Name

**Pete Aguilar**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CA District: 31

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 4 |   | 2 | 0 | 1 | 4 |

**Transaction ID : B499357**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

**C. Bera for Congress**

Mailing Address Post Office Box 582496

City State Zip Code  
Elk Grove CA 95758

Purpose of Disbursement  
Contribution

011

Candidate Name

**Amerish Bera**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CA District: 07

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 4 |   | 2 | 0 | 1 | 4 |

**Transaction ID : B499338**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. Friends of Lois Capps**

Mailing Address P.O. Box 23940

City Santa Barbara State CA Zip Code 93121

Purpose of Disbursement Contribution

011

Candidate Name  
**Lois Capps**

Category/Type

Office Sought:  House  Senate  President  
State: CA District: 24

Disbursement For: 2014  
 Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 24 / 2014

Transaction ID : B499353

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Judy Chu for Congress**

Mailing Address 6380 Wilshire Blvd # 1612

City Los Angeles State CA Zip Code 90048

Purpose of Disbursement Contribution

011

Candidate Name  
**Judy Chu**

Category/Type

Office Sought:  House  Senate  President  
State: CA District: 27

Disbursement For: 2014  
 Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 24 / 2014

Transaction ID : B499354

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Susan Davis for Congress**

Mailing Address PO Box 84049

City San Diego State CA Zip Code 92138

Purpose of Disbursement Contribution

011

Candidate Name  
**Susan Davis**

Category/Type

Office Sought:  House  Senate  President  
State: CA District: 53

Disbursement For: 2014  
 Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 24 / 2014

Transaction ID : B499373

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

15000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. DeSaulnier for Congress**

Mailing Address 5429 Madison Avenue

City Sacramento State CA Zip Code 95841

Purpose of Disbursement  
Contribution

011

Candidate Name

**Mark DeSaulnier**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CA District: 11

Date of Disbursement

MM / DD / YYYY  
06 / 24 / 2014

**Transaction ID : B499339**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Anna Eshoo for Congress**

Mailing Address 555 Capitol Mall Suite 1425

City Sacramento State CA Zip Code 95814

Purpose of Disbursement  
Contribution

011

Candidate Name

**Anna Eshoo**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CA District: 18

Date of Disbursement

MM / DD / YYYY  
06 / 24 / 2014

**Transaction ID : B499345**

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

**C. Janice Hahn for Congress**

Mailing Address 1379 Park Western Drive #142

City San Pedro State CA Zip Code 90732

Purpose of Disbursement  
Contribution

011

Candidate Name

**Janice Hahn**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CA District: 44

Date of Disbursement

MM / DD / YYYY  
06 / 24 / 2014

**Transaction ID : B499367**

Amount of Each Disbursement this Period

4000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

13000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. Mike Honda for Congress**

Mailing Address 123 E. San Carlos St. #531

City San Jose State CA Zip Code 95112

Purpose of Disbursement  
Contribution

011

Candidate Name  
**Mike Honda**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CA District: 17

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 24 / 2014

Transaction ID : B499344

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Barbara Lee for Congress**

Mailing Address 409 13th St. 17th Fl.

City Oakland State CA Zip Code 94612

Purpose of Disbursement  
Contribution

011

Candidate Name  
**Barbara Lee**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CA District: 13

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 24 / 2014

Transaction ID : B499341

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Ted Lieu for Congress**

Mailing Address 6380 Wilshire Blvd #1612

City Los Angeles State CA Zip Code 90048

Purpose of Disbursement  
Contribution

011

Candidate Name  
**Ted Lieu**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CA District: 33

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 24 / 2014

Transaction ID : B499360

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

15000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. Nancy Pelosi for Congress**

Mailing Address 700 13th Street NW #600

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Contribution

011

Candidate Name

**Nancy Pelosi**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CA District: 12

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    | / | 24    | / | 2014      |

**Transaction ID : B499340**

Amount of Each Disbursement this Period

|          |
|----------|
| 5,000.00 |
|----------|

Full Name (Last, First, Middle Initial)

**B. Scott Peters for Congress**

Mailing Address PO Box 70980

City Washington State DC Zip Code 20024

Purpose of Disbursement  
Contribution

011

Candidate Name

**Scott Peters**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CA District: 52

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    | / | 24    | / | 2014      |

**Transaction ID : B499372**

Amount of Each Disbursement this Period

|          |
|----------|
| 5,000.00 |
|----------|

Full Name (Last, First, Middle Initial)

**C. Dr. Raul Ruiz for Congress Cmte**

Mailing Address Po Box 3433

City Palm Desert State CA Zip Code 92261

Purpose of Disbursement  
Contribution

011

Candidate Name

**Raul Ruiz MD**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CA District: 36

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    | / | 24    | / | 2014      |

**Transaction ID : B499365**

Amount of Each Disbursement this Period

|          |
|----------|
| 5,000.00 |
|----------|

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

|          |
|----------|
| 15000.00 |
|----------|

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

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. Committee To Re-Elect Loretta Sanchez**

Mailing Address P.O. Box 6037

City Santa Ana State CA Zip Code 92706

Purpose of Disbursement Contribution

011

Candidate Name

**Loretta Sanchez**

Category/Type

Office Sought:  House  Senate  President  
State: CA District: 46

Disbursement For: 2014  
 Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 24 / 2014

Transaction ID : B499369

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

**B. Sherman for Congress**

Mailing Address 777 S. Figueroa St Ste 4050

City Los Angeles State CA Zip Code 90017

Purpose of Disbursement Contribution

011

Candidate Name

**Brad Sherman**

Category/Type

Office Sought:  House  Senate  President  
State: CA District: 30

Disbursement For: 2014  
 Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 24 / 2014

Transaction ID : B499355

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

**C. Swalwell for Congress**

Mailing Address PO Box 2847

City Dublin State CA Zip Code 94568

Purpose of Disbursement Contribution

011

Candidate Name

**Eric M Swalwell**

Category/Type

Office Sought:  House  Senate  President  
State: CA District: 15

Disbursement For: 2014  
 Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 24 / 2014

Transaction ID : B499342

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

13000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. Mark Takano for Congress**

Mailing Address PO Box 5214

City Riverside State CA Zip Code 92517

Purpose of Disbursement Contribution

011

Candidate Name

**Mark Takano**

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  Other (specify) ▼

State: CA District: 41

Date of Disbursement

MM / DD / YYYY  
06 / 24 / 2014

Transaction ID : B499366

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Norma Torres for Congress**

Mailing Address 728 W. Edna Place

City Covina State CA Zip Code 91722

Purpose of Disbursement Contribution

011

Candidate Name

**Norma Torres**

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  Other (specify) ▼

State: CA District: 35

Date of Disbursement

MM / DD / YYYY  
06 / 24 / 2014

Transaction ID : B499363

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Valadao for Congress**

Mailing Address 504 Van Ness Avenue

City Fresno State CA Zip Code 93721

Purpose of Disbursement Contribution

011

Candidate Name

**David Valadao**

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  Other (specify) ▼

State: CA District: 21

Date of Disbursement

MM / DD / YYYY  
06 / 24 / 2014

Transaction ID : B499352

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

15000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. Friends of Juan Vargas**

Mailing Address 330 Encinitas Blvd. Suite 101

City Encinitas State CA Zip Code 92024

Purpose of Disbursement  
Contribution

011

Candidate Name

**Juan Vargas**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CA District: 51

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 24 / 2014

Transaction ID : B499370

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

**B. Friends of Elizabeth Esty**

Mailing Address PO Box 61

City Cheshire State CT Zip Code 06410

Purpose of Disbursement  
Contribution

011

Candidate Name

**Elizabeth Esty**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CT District: 05

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 25 / 2014

Transaction ID : B499508

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Himes for Congress**

Mailing Address 857 Post Road #312

City Fairfield State CT Zip Code 06824

Purpose of Disbursement  
Contribution

011

Candidate Name

**Jim Himes**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CT District: 04

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 25 / 2014

Transaction ID : B499507

Amount of Each Disbursement this Period

2000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

11000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. Larson For Congress**

Mailing Address PO Box 261172

City Hartford State CT Zip Code 06126

Purpose of Disbursement  
Contribution

011

Candidate Name

**John B Larson**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CT District: 01

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 9 |   | 2 | 0 | 1 | 4 |

**Transaction ID : B497153**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 2 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|   |   |   |   |   |   |   |   |   |   |

**[MEMO ITEM]**

As originally reported on 2014 June Monthly FEC report

Full Name (Last, First, Middle Initial)

**B. Larson For Congress**

Mailing Address PO Box 261172

City Hartford State CT Zip Code 06126

Purpose of Disbursement  
Contribution

011

Candidate Name

**John B Larson**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CT District: 01

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 9 |   | 2 | 0 | 1 | 4 |

**Transaction ID : B497153r**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 2 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|   |   |   |   |   |   |   |   |   |   |

**[MEMO ITEM]**

Re-designation of above contribution

Full Name (Last, First, Middle Initial)

**C. Citizens for Eleanor Holmes Norton**

Mailing Address 2201 Wisconsin Avenue NW Suite 32

City Washington State DC Zip Code 20007

Purpose of Disbursement  
Contribution

011

Candidate Name

**Eleanor Holmes Norton**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: DC District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 2 | 8 |   | 2 | 0 | 1 | 4 |

**Transaction ID : B492667**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|   |   |   |   |   |   |   |   |   |   |

**[MEMO ITEM]**

As originally reported on 2014 April Monthly FEC report

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|   |   |   |   |   |   |   |   |   |   |

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|   |   |   |   |   |   |   |   |   |   |

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. Citizens for Eleanor Holmes Norton**

Mailing Address 2201 Wisconsin Avenue NW Suite 32

City Washington State DC Zip Code 20007

Purpose of Disbursement  
Contribution

011

Candidate Name

**Eleanor Holmes Norton**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: DC District:

Date of Disbursement

MM / DD / YYYY  
06 / 19 / 2014

Transaction ID : **B492667r**

Amount of Each Disbursement this Period

1000.00

**[MEMO ITEM]**

Re-designation of above contribution

Full Name (Last, First, Middle Initial)

**B. Mario Diaz-Balart For Congress**

Mailing Address 8770 SW 72nd Street #420

City Miami State FL Zip Code 33173

Purpose of Disbursement  
Contribution

011

Candidate Name

**Mario Diaz-Balart**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: FL District: 25

Date of Disbursement

MM / DD / YYYY  
06 / 23 / 2014

Transaction ID : **B499089**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Ros-Lehtinen for Congress**

Mailing Address PO Box 522784

City Miami State FL Zip Code 33152

Purpose of Disbursement  
Contribution

011

Candidate Name

**Ileana Ros-Lehtinen**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: FL District: 27

Date of Disbursement

MM / DD / YYYY  
06 / 23 / 2014

Transaction ID : **B499088**

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

2000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. Ted Deutch For Congress Committee**

Mailing Address 1050 17th St NW Ste. 590

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Contribution

011

Candidate Name

**Theodore E Deutch**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: FL District: 21

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 5 |   | 2 | 0 | 1 | 4 |

**Transaction ID : B499514**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 4 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

**B. Graham For Congress**

Mailing Address PO Box 310

City Tallahassee State FL Zip Code 32302

Purpose of Disbursement  
Contribution

011

Candidate Name

**Gwen Graham**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: FL District: 02

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 5 |   | 2 | 0 | 1 | 4 |

**Transaction ID : B499509**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 4 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

**C. Committee To Elect Alan Grayson**

Mailing Address PO Box 533616

City Orlando State FL Zip Code 32853

Purpose of Disbursement  
Contribution

011

Candidate Name

**Alan Grayson**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: FL District: 09

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 5 |   | 2 | 0 | 1 | 4 |

**Transaction ID : B499510**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 4 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 2 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

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

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 4 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. Hastings for Congress**

Mailing Address P.O. Box 100277 .

City State Zip Code  
Ft. Lauderdale FL 33310

Purpose of Disbursement  
Contribution

011

Candidate Name

**Alcee Hastings**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: FL District: 20

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 5 |   | 2 | 0 | 1 | 4 |

**Transaction ID : B499513**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 2 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

**B. Friends of Patrick Murphy**

Mailing Address 4521 PGA Blvd. #412

City State Zip Code  
Palm Beach Gardens FL 33418

Purpose of Disbursement  
Contribution

011

Candidate Name

**Patrick Murphy**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: FL District: 18

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 5 |   | 2 | 0 | 1 | 4 |

**Transaction ID : B499511**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 3 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

**C. Friends of Patrick Murphy**

Mailing Address 4521 PGA Blvd. #412

City State Zip Code  
Palm Beach Gardens FL 33418

Purpose of Disbursement  
Contribution

011

Candidate Name

**Patrick Murphy**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: FL District: 18

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 5 |   | 2 | 0 | 1 | 4 |

**Transaction ID : B499512**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

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

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. Frederica S. Wilson For Congress**

Mailing Address 19821 Nw 2nd Avenue Box 354

City State Zip Code  
Miami Gardens FL 33169

Purpose of Disbursement  
Contribution

011

Candidate Name

**Frederica S Wilson**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: FL District: 24

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 5 |   | 2 | 0 | 1 | 4 |

**Transaction ID : B499515**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 3 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

**B. Frederica S. Wilson For Congress**

Mailing Address 19821 Nw 2nd Avenue Box 354

City State Zip Code  
Miami Gardens FL 33169

Purpose of Disbursement  
Contribution

011

Candidate Name

**Frederica S Wilson**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: FL District: 24

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 5 |   | 2 | 0 | 1 | 4 |

**Transaction ID : B499516**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

**C. Loeb sack for Congress**

Mailing Address P.O. Box 3013

City State Zip Code  
Iowa City IA 52244

Purpose of Disbursement  
Contribution

011

Candidate Name

**Dave Loeb sack**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: IA District: 02

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 5 |   | 2 | 0 | 1 | 4 |

**Transaction ID : B499518**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 3 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

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

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 3 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. Mowrer for Iowa**

Mailing Address PO Box 9

City Boone State IA Zip Code 50036

Purpose of Disbursement Contribution

011

Candidate Name

**James Mowrer**

Category/Type

Office Sought:  House  Senate  President  
State: IA District: 04

Disbursement For: 2014  
 Primary  General  Other (specify) ▼

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 5 |   | 2 | 0 | 1 | 4 |

Transaction ID : B499519

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

**B. Pat Murphy for Iowa**

Mailing Address PO Box 692

City Dubuque State IA Zip Code 52004

Purpose of Disbursement Contribution

011

Candidate Name

**Pat Murphy**

Category/Type

Office Sought:  House  Senate  President  
State: IA District: 01

Disbursement For: 2014  
 Primary  General  Other (specify) ▼

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 5 |   | 2 | 0 | 1 | 4 |

Transaction ID : B499517

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

**C. Friends of Cheri Bustos**

Mailing Address PO BOX 77

City East Moline State IL Zip Code 61244

Purpose of Disbursement Contribution

011

Candidate Name

**Cheri Bustos**

Category/Type

Office Sought:  House  Senate  President  
State: IL District: 17

Disbursement For: 2014  
 Primary  General  Other (specify) ▼

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 5 |   | 2 | 0 | 1 | 4 |

Transaction ID : B499523

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

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

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. Rodney Davis for Congress**

Mailing Address PO Box 344

City Taylorville State IL Zip Code 62568

Purpose of Disbursement  
Contribution

011

Candidate Name

**Rodney Davis**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: IL District: 13

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 25 / 2014

Transaction ID : **B499522**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Friends of Dick Durbin Committee**

Mailing Address PO Box 1949

City Springfield State IL Zip Code 62705

Purpose of Disbursement  
Contribution

011

Candidate Name

**Richard J Durbin**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: IL District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 25 / 2014

Transaction ID : **B499524**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Enyart for Congress**

Mailing Address PO Box 308

City Belleville State IL Zip Code 62222

Purpose of Disbursement  
Contribution

011

Candidate Name

**William L Enyart Jr.**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: IL District: 12

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 25 / 2014

Transaction ID : **B499521**

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

15000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. Schakowsky for Congress**

Mailing Address P.O. Box 5130

City State Zip Code  
Evanston IL 60204

Purpose of Disbursement  
Contribution

011

Candidate Name

**Janice D Schakowsky**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: IL District: 09

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 5 |   | 2 | 0 | 1 | 4 |

**Transaction ID : B499520**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 2 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

**B. Andre Carson for Congress**

Mailing Address P.O. Box 1863

City State Zip Code  
Indianapolis IN 46206

Purpose of Disbursement  
Contribution

011

Candidate Name

**Andre Carson**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: IN District: 07

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 5 |   | 2 | 0 | 1 | 4 |

**Transaction ID : B499525**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 2 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

**C. Guthrie for Congress**

Mailing Address PO Box 9639

City State Zip Code  
Bowling Green KY 42102

Purpose of Disbursement  
Contribution

011

Candidate Name

**Brett Guthrie**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: KY District: 02

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 3 |   | 2 | 0 | 1 | 4 |

**Transaction ID : B499084**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

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

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. Whitfield for Congress Committee**

Mailing Address P.O. Box 391

City Hopkinsville State KY Zip Code 42241

Purpose of Disbursement Contribution

011

Candidate Name

**Edward Whitfield**

Category/Type

Office Sought:  House  Senate  President  
State: KY District: 01

Disbursement For: 2014  
 Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 23 / 2014

**Transaction ID : B499085**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Elisabeth Jensen for Congress**

Mailing Address P. O. Box 1053

City Lexington State KY Zip Code 40588

Purpose of Disbursement Contribution

011

Candidate Name

**Elisabeth Jensen**

Category/Type

Office Sought:  House  Senate  President  
State: KY District: 06

Disbursement For: 2014  
 Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 25 / 2014

**Transaction ID : B499527**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Yarmuth for Congress**

Mailing Address 1819 Brownsboro Road

City Louisville State KY Zip Code 40202

Purpose of Disbursement Contribution

011

Candidate Name

**John Yarmuth**

Category/Type

Office Sought:  House  Senate  President  
State: KY District: 03

Disbursement For: 2014  
 Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 25 / 2014

**Transaction ID : B499526**

Amount of Each Disbursement this Period

2000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

8000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. Katherine Clark for Congress**

Mailing Address PO Box 361

City Malden State MA Zip Code 02148

Purpose of Disbursement  
Contribution

011

Candidate Name

**Katherine Clark**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: MA District: 05

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 3 |   | 2 | 0 | 1 | 4 |

**Transaction ID : B499087**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 4 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

**B. Together PAC Inc.**

Mailing Address 123 Lewis Wharf

City Boston State MA Zip Code 02110

Purpose of Disbursement  
Contribution

011

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State: District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 5 |   | 2 | 0 | 1 | 4 |

**Transaction ID : B499542**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 3 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

**C. Friends of John Delaney**

Mailing Address PO Box 70835

City Bethesda State MD Zip Code 20813

Purpose of Disbursement  
Contribution

011

Candidate Name

**John Delaney**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: MD District: 06

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 5 |   | 2 | 0 | 1 | 4 |

**Transaction ID : B499528**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 8 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 8 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. Van Hollen for Congress**

Mailing Address 10537 St. Paul St.

City Kensington State MD Zip Code 20895

Purpose of Disbursement  
Contribution

011

Candidate Name

**Chris Van Hollen**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MD District: 08

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 5 |   | 2 | 0 | 1 | 4 |

**Transaction ID : B499529**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

**B. Pam Byrnes for Congress**

Mailing Address PO Box 485

City Dexter State MI Zip Code 48130

Purpose of Disbursement  
Contribution

011

Candidate Name

**Pam Byrnes**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MI District: 07

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 5 |   | 2 | 0 | 1 | 4 |

**Transaction ID : B499531**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

**C. Cannon for Congress**

Mailing Address PO Box 954

City Traverse City State MI Zip Code 49684

Purpose of Disbursement  
Contribution

011

Candidate Name

**Jerry Cannon**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MI District: 01

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 5 |   | 2 | 0 | 1 | 4 |

**Transaction ID : B499530**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

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

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. Friends of John Conyers**

Mailing Address 1831 Bay Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Contribution

011

Candidate Name

**John Conyers Jr.**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MI District: 13

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 25    |   | 2014      |

Transaction ID : B499535

Amount of Each Disbursement this Period

|         |
|---------|
| 4000.00 |
|---------|

Full Name (Last, First, Middle Initial)

**B. Debbie Dingell for Congress**

Mailing Address PO Box 746

City Dearborn State MI Zip Code 48121

Purpose of Disbursement  
Contribution

011

Candidate Name

**Debbie Dingell**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MI District: 12

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 25    |   | 2014      |

Transaction ID : B499534

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Full Name (Last, First, Middle Initial)

**C. Friends of Dan Kildee**

Mailing Address P.O. Box 248

City Flint State MI Zip Code 48501

Purpose of Disbursement  
Contribution

011

Candidate Name

**Dan Kildee**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MI District: 05

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 25    |   | 2014      |

Transaction ID : B499532

Amount of Each Disbursement this Period

|         |
|---------|
| 3000.00 |
|---------|

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

|          |
|----------|
| 12000.00 |
|----------|

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

|  |
|--|
|  |
|--|

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. Bobby for Michigan**

Mailing Address PO Box 87503

City State Zip Code  
Canton MI 48187

Purpose of Disbursement  
Contribution

011

Candidate Name

**Bobby McKenzie**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MI District: 11

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 25 / 2014

**Transaction ID : B499533**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Ellison for Congress**

Mailing Address PO Box 6072

City State Zip Code  
Minneapolis MN 55406

Purpose of Disbursement  
Contribution

011

Candidate Name

**Keith Ellison**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MN District: 05

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 06 / 2014

**Transaction ID : B497650**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Nolan for Congress Volunteer Committee**

Mailing Address PO Box 1041

City State Zip Code  
Brainerd MN 56401

Purpose of Disbursement  
Contribution

011

Candidate Name

**Richard Nolan**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MN District: 08

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 06 / 2014

**Transaction ID : B497649**

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

11000.00

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



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. Tim Walz for US Congress**

Mailing Address PO Box 938

City Mankato State MN Zip Code 56002

Purpose of Disbursement Contribution

011

Candidate Name

**Tim Walz**

Category/Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: MN District: 01

Date of Disbursement

MM / DD / YYYY  
06 / 06 / 2014

**Transaction ID : B497651**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. Friends for Perske**

Mailing Address PO Box 824

City Sartell State MN Zip Code 56377

Purpose of Disbursement Contribution

011

Candidate Name

**Joe Perske**

Category/Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: MN District: 06

Date of Disbursement

MM / DD / YYYY  
06 / 25 / 2014

**Transaction ID : B499537**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**C. Tim Walz for US Congress**

Mailing Address PO Box 938

City Mankato State MN Zip Code 56002

Purpose of Disbursement Contribution

011

Candidate Name

**Tim Walz**

Category/Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: MN District: 01

Date of Disbursement

MM / DD / YYYY  
06 / 25 / 2014

**Transaction ID : B499536**

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

7000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. Montanans for Lewis**

Mailing Address PO Box 1916

City Billings State MT Zip Code 59103

Purpose of Disbursement  
Contribution

011

Candidate Name  
**John Lewis**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MT District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 25 / 2014

Transaction ID : B499538

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Butterfield for Congress Committee**

Mailing Address PO Box 2571

City Wilson State NC Zip Code 27894

Purpose of Disbursement  
Contribution

011

Candidate Name  
**G.K. Butterfield**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NC District: 01

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 25 / 2014

Transaction ID : B499539

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

**C. Fjeld for Congress**

Mailing Address P.O. Box 635

City Hillsborough State NC Zip Code 27278

Purpose of Disbursement  
Contribution

011

Candidate Name  
**Laura Fjeld**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NC District: 06

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 25 / 2014

Transaction ID : B499541

Amount of Each Disbursement this Period

2000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

11000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. Price for Congress Committee**

Mailing Address P.O. Box 1986

City Raleigh State NC Zip Code 27602

Purpose of Disbursement  
Contribution

011

Candidate Name

**David E Price**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NC District: 04

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 25 / 2014

**Transaction ID : B499540**

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

**B. Kuster for Congress**

Mailing Address P.O. Box 1498

City Concord State NH Zip Code 03302

Purpose of Disbursement  
Contribution

011

Candidate Name

**Ann Kuster-McClane**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NH District: 02

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 25 / 2014

**Transaction ID : B499545**

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

**C. Kuster for Congress**

Mailing Address P.O. Box 1498

City Concord State NH Zip Code 03302

Purpose of Disbursement  
Contribution

011

Candidate Name

**Ann Kuster-McClane**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NH District: 02

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 25 / 2014

**Transaction ID : B499546**

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

11000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. Carol Shea-Porter for Congress**

Mailing Address PO Box 453

City Rochester State NH Zip Code 03866

Purpose of Disbursement  
Contribution

011

Candidate Name

**Carol Shea-Porter**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NH District: 01

Date of Disbursement

MM / DD / YYYY  
06 / 25 / 2014

Transaction ID : **B499543**

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

**B. Carol Shea-Porter for Congress**

Mailing Address PO Box 453

City Rochester State NH Zip Code 03866

Purpose of Disbursement  
Contribution

011

Candidate Name

**Carol Shea-Porter**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NH District: 01

Date of Disbursement

MM / DD / YYYY  
06 / 25 / 2014

Transaction ID : **B499544**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. LoBiondo for Congress**

Mailing Address P.O. Box 550

City Vineland State NJ Zip Code 08362

Purpose of Disbursement  
Contribution

011

Candidate Name

**Frank A LoBiondo**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NJ District: 02

Date of Disbursement

MM / DD / YYYY  
06 / 25 / 2014

Transaction ID : **B499547**

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

13000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. Pallone for Congress**

Mailing Address PO Box 3176

City State Zip Code  
Long Branch NJ 07740

Purpose of Disbursement  
Contribution

011

Candidate Name

**Frank Pallone Jr.**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NJ District: 06

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 25 / 2014

**Transaction ID : B499548**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**B. Pascrell for Congress**

Mailing Address PO Box 100

City State Zip Code  
Teaneck NJ 07666

Purpose of Disbursement  
Contribution

011

Candidate Name

**William J Pascrell Jr.**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NJ District: 09

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 25 / 2014

**Transaction ID : B499550**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Donald Payne Jr. for Congress**

Mailing Address P.O. Box 2406

City State Zip Code  
Newark NJ 07114

Purpose of Disbursement  
Contribution

011

Candidate Name

**Donald Payne Jr.**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NJ District: 10

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 25 / 2014

**Transaction ID : B499551**

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

4000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. Sires for Congress**

Mailing Address 6050 Blvd. East

City West New York State NJ Zip Code 07093

Purpose of Disbursement  
Contribution

011

Candidate Name

**Albio Sires MD**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NJ District: 08

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 25 / 2014

**Transaction ID : B499549**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Titus for Congress**

Mailing Address P.O. Box 72454

City Las Vegas State NV Zip Code 89170

Purpose of Disbursement  
Contribution

011

Candidate Name

**Dina Titus**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NV District: 01

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 10 / 2014

**Transaction ID : B497858**

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

**C. Erin Bilbray for Congress**

Mailing Address 9101 W Sahara Ave Ste 105 B20

City Las Vegas State NV Zip Code 89117

Purpose of Disbursement  
Contribution

011

Candidate Name

**Erin Bilbray-Kohn**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NV District: 03

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 25 / 2014

**Transaction ID : B499553**

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

10000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. Titus for Congress**

Mailing Address P.O. Box 72454

City Las Vegas State NV Zip Code 89170

Purpose of Disbursement  
Contribution

011

Candidate Name

**Dina Titus**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NV District: 01

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 5 |   | 2 | 0 | 1 | 4 |

**Transaction ID : B499552**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 4 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

**B. Espailat for Congress**

Mailing Address 210 Sherman Ave. Suite B

City New York State NY Zip Code 10034

Purpose of Disbursement  
Contribution

011

Candidate Name

**Adriano Espailat**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NY District: 13

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 3 |   | 2 | 0 | 1 | 4 |

**Transaction ID : B499091**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

**C. Richard Hanna for Congress Committee**

Mailing Address P.O Box 118

City Utica State NY Zip Code 13503

Purpose of Disbursement  
Contribution

011

Candidate Name

**Richard Hanna**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NY District: 22

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 3 |   | 2 | 0 | 1 | 4 |

**Transaction ID : B499090**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 3 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 2 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

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

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 2 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. Kathleen Rice for Congress**

Mailing Address 410 Jericho Turnpike Suite 200

City Jericho State NY Zip Code 11753

Purpose of Disbursement  
Contribution

011

Candidate Name

**Kathleen Rice**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NY District: 04

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 3 |   | 2 | 0 | 1 | 4 |

**Transaction ID : B499092**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

**B. Committee to Elect Martha Robertson**

Mailing Address PO Box 54

City Dryden State NY Zip Code 13053

Purpose of Disbursement  
Contribution

011

Candidate Name

**Martha Robertson**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NY District: 23

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 3 |   | 2 | 0 | 1 | 4 |

**Transaction ID : B499321**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

**C. Sean Patrick Maloney for Congress**

Mailing Address PO Box 270

City Newburgh State NY Zip Code 12550

Purpose of Disbursement  
Contribution

011

Candidate Name

**Sean Patrick Maloney**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NY District: 18

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 5 |   | 2 | 0 | 1 | 4 |

**Transaction ID : B499554**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

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

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. Ohio Democratic Party**

Mailing Address 340 East Fulton Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Not Applicable

Date of Disbursement

MM / DD / YYYY  
06 / 23 / 2014

Transaction ID : B499279

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Bonamici for Congress**

Mailing Address 3321 Se 20th Ave

City Portland State OR Zip Code 97202

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: OR District: 01

Date of Disbursement

MM / DD / YYYY  
06 / 25 / 2014

Transaction ID : B499556

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Jeff Merkley for Oregon**

Mailing Address PO Box 14172

City Portland State OR Zip Code 97293

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: OR District:

Date of Disbursement

MM / DD / YYYY  
06 / 25 / 2014

Transaction ID : B499555

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

15000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. Friends of Glenn Thompson**

Mailing Address PO Box 1112

City State Zip Code  
State College PA 16804

Purpose of Disbursement  
Contribution

011

Candidate Name

**Glenn Thompson**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: PA District: 05

Date of Disbursement

MM / DD / YYYY  
06 / 25 / 2014

Transaction ID : B499557

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Reed Committee**

Mailing Address PO Box 8628

City State Zip Code  
Cranston RI 02920

Purpose of Disbursement  
Contribution

011

Candidate Name

**Jack Reed**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: RI District:

Date of Disbursement

MM / DD / YYYY  
06 / 25 / 2014

Transaction ID : B499564

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Friends of Jim Clyburn**

Mailing Address PO Box 12567

City State Zip Code  
Columbia SC 29211

Purpose of Disbursement  
Contribution

011

Candidate Name

**James E Clyburn**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: SC District: 06

Date of Disbursement

MM / DD / YYYY  
06 / 06 / 2014

Transaction ID : B497705

Amount of Each Disbursement this Period

3000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

13000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. Friends of Jim Clyburn**

Mailing Address PO Box 12567

City State Zip Code  
Columbia SC 29211

Purpose of Disbursement  
Contribution

011

Candidate Name

**James E Clyburn**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: SC District: 06

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 25 / 2014

**Transaction ID : B499558**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Friends of Pete Gallego**

Mailing Address P.O. Box 1781

City State Zip Code  
San Antonio TX 78296

Purpose of Disbursement  
Contribution

011

Candidate Name

**Pete Gallego**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: TX District: 23

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 23 / 2014

**Transaction ID : B499086**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Filemon Vela for Congress**

Mailing Address 2929 Mossrock Street Suite 215

City State Zip Code  
San Antonio TX 78230

Purpose of Disbursement  
Contribution

011

Candidate Name

**Filemon Vela**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: TX District: 34

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 25 / 2014

**Transaction ID : B499561**

Amount of Each Disbursement this Period

2000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

12000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. Asian American Action Fund**

Mailing Address 1150 17th Street NW Suite 400

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 18 / 2014

**Transaction ID : B498715**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Doug Owens for Congress**

Mailing Address PO Box 2786

City Salt Lake City State UT Zip Code 84110

Purpose of Disbursement  
Contribution

011

Candidate Name

**Doug Owens**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: UT District: 04

Date of Disbursement

MM / DD / YYYY  
06 / 23 / 2014

**Transaction ID : B499287**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**C. Friends of Don Beyer**

Mailing Address 1751 Potomac Greens Drive

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Contribution

011

Candidate Name

**Don Beyer Jr.**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: VA District: 08

Date of Disbursement

MM / DD / YYYY  
06 / 25 / 2014

**Transaction ID : B499562**

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

12000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. John Foust for Congress**

Mailing Address PO Box 962

City McLean State VA Zip Code 22101

Purpose of Disbursement  
Contribution

011

Candidate Name  
**John Foust**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: VA District: 10

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 25 / 2014

Transaction ID : B499563

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Friends for Jim McDermott**

Mailing Address PO Box 21786

City Seattle State WA Zip Code 98111

Purpose of Disbursement  
Contribution

011

Candidate Name  
**James A McDermott**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: WA District: 07

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 25 / 2014

Transaction ID : B499566

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

**C. Friends of Dave Reichert**

Mailing Address PO Box 2032

City Issaquah State WA Zip Code 98027

Purpose of Disbursement  
Contribution

011

Candidate Name  
**Dave Reichert**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: WA District: 08

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 25 / 2014

Transaction ID : B499567

Amount of Each Disbursement this Period

2000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

10000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. Moore for Congress**

Mailing Address PO Box 16646

City Milwaukee State WI Zip Code 53216

Purpose of Disbursement  
Contribution

011

Candidate Name

**Gwendolynne Moore**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: WI District: 04

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 25    |   | 2014      |

Transaction ID : B499569

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Full Name (Last, First, Middle Initial)

**B. Mark Pocan for Congress**

Mailing Address PO Box 327

City Madison State WI Zip Code 53701

Purpose of Disbursement  
Contribution

011

Candidate Name

**Mark Pocan**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: WI District: 02

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 25    |   | 2014      |

Transaction ID : B499568

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Full Name (Last, First, Middle Initial)

**C. Keep Nick Rahall In Congress Committee**

Mailing Address PO Box 64

City Beckley State WV Zip Code 25802

Purpose of Disbursement  
Contribution

011

Candidate Name

**Nick J Rahall II**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: WV District: 03

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 25    |   | 2014      |

Transaction ID : B499570

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

|          |
|----------|
| 11000.00 |
|----------|

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

|           |
|-----------|
| 408500.00 |
|-----------|