

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEA Fund for Children and Public Education**

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

**A. SPANN, DAREIN, , ,**

Mailing Address 1010 BELLEVUE PL  
APT B

City  
JACKSON

State  
MS

Zip Code  
39202-2712

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JACKSON PUBLIC SCHOOLS

Occupation (for Individual)  
CLASSROOM TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 18 / 2019

**Transaction ID : A2019-2530003**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. STADIMIRE, DEDRICK, , ,**

Mailing Address 6122 OVERLOOK RD

City  
MOBILE

State  
AL

Zip Code  
36618-2806

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MOBILE COUNTY SCH DIST

Occupation (for Individual)  
CLASSROOM TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.19

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 04 / 2019

**Transaction ID : A2019-2525124**

Amount of Each Receipt this Period

0.87

☐ Memo Item

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

**C. STALDER, SABRINA, A, ,**

Mailing Address 5389 STATE ST

City  
ALBANY

State  
OH

Zip Code  
45710-9355

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ATHENS CITY SCH DIST

Occupation (for Individual)  
CLASSROOM TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 18 / 2019

**Transaction ID : A2019-2530553**

Amount of Each Receipt this Period

2.00

☐ Memo Item

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

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

27.87