

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

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

FOR LINE NUMBER: PAGE 62 OF 94

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Postal Supervisors PAC

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

A. RANDALL, C. MICHELE, , ,

Mailing Address 100 Eastern Avenue

City
AnnapolisState
MDZip Code
21403FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United States Postal ServiceOccupation (for Individual)
SUPV DIST OPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2310.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2019

Transaction ID : PR451781931554

Amount of Each Receipt this Period

100.00

☐ Memo Item

P/R Deduction (\$50.00 Weekly)

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

B. HARDIN, DONALD, A, ,

Mailing Address PO BOX 484

City
BENTON HARBORState
MIZip Code
49023-0484FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United States Postal ServiceOccupation (for Individual)
MGR CUST SERVCS

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
12 / 31 / 2019

Transaction ID : PR451793031554

Amount of Each Receipt this Period

20.00

☐ Memo Item

P/R Deduction (\$10.00 Weekly)

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

C. LASTER, JACSHICA, D, ,

Mailing Address 9721 STEINWAY

City
CLEVELANDState
OHZip Code
44104-3466FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United States Postal ServiceOccupation (for Individual)
MGR CUST SERVCS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2019

Transaction ID : PR451828631554

Amount of Each Receipt this Period

10.00

☐ Memo Item

P/R Deduction (\$5.00 Weekly)

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

130.00

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