

# 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 420

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)  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)
  - May 20 (M5)
  - Jun 20 (M6)
  - Jul 20 (M7)
  - Aug 20 (M8)
  - Sep 20 (M9)
  - Oct 20 (M10)
  - 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] 02 / 01 / 2012 through [MM] / [DD] / [YYYY] 02 / 29 / 2012

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 09 / 20 / 2012

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									
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**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 This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>		2337567.53
(b) Cash on Hand at Beginning of Reporting Period.....	2407138.32	
(c) Total Receipts (from Line 19) .....	190628.06	343196.74
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	2597766.38	2680764.27
7. Total Disbursements (from Line 31).....	171541.70	254539.59
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	2426224.68	2426224.68
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on 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 Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	11232.11	27565.46
(ii) Unitemized .....	179395.95	315631.28
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	190628.06	343196.74
(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) .....	190628.06	343196.74
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	0.00
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))..... ▶	190628.06	343196.74
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	190628.06	343196.74

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B 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 .....	641.70	1139.59
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	641.70	1139.59
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	170900.00	253400.00
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	0.00
(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	0.00
29. Other Disbursements .....	0.00	0.00
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)) ..	171541.70	254539.59
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	171541.70	254539.59

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	190628.06	343196.74
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	190628.06	343196.74
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	641.70	1139.59
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	641.70	1139.59

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

Form/Schedule: F3XA  
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: (check only one)	PAGE 7 OF 70
	<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**

**A. 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 MANAGER D

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
02 / 03 / 2012  
Transaction ID : **A2012-518240**

Amount of Each Receipt this Period  
100.00

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 MANAGER D

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
02 / 21 / 2012  
Transaction ID : **A2012-518241**

Amount of Each Receipt this Period  
100.00

PAYROLL DEDUCTION

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

Mailing Address PO BOX 1233

City BETHEL State AK Zip Code 99559

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

Name of Employer LOWER KUSKOKWIM SCHOOL DIST Occupation CLASSROOM TEACHER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
02 / 13 / 2012  
Transaction ID : **A2012-502995**

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	400.00
<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 8 OF 70  
(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. BARBARA K ANGAIK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 1233  
 City State Zip Code  
 BETHEL AK 99559  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 LOWER KUSKOKWIM SCHOOL DIST 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  
 02 / 13 / 2012  
**Transaction ID : A2012-502996**  
 Amount of Each Receipt this Period  
 5.00

**B. BARBARA K ANGAIK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 1233  
 City State Zip Code  
 BETHEL AK 99559  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 LOWER KUSKOKWIM SCHOOL DIST CLASSROOM TEACHER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 27 / 2012  
**Transaction ID : A2012-502990**  
 Amount of Each Receipt this Period  
 100.00

**C. BARBARA K ANGAIK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 1233  
 City State Zip Code  
 BETHEL AK 99559  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 LOWER KUSKOKWIM SCHOOL DIST CLASSROOM TEACHER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 27 / 2012  
**Transaction ID : A2012-502991**  
 Amount of Each Receipt this Period  
 5.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 110.00  
**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 9 OF 70
	<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. BARBARA K ANGAIK**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 1233

City BETHEL	State AK	Zip Code 99559
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FEC ID number of contributing federal political committee. **C**

Name of Employer LOWER KUSKOKWIM SCHOOL DIST	Occupation CLASSROOM TEACHER
---	---------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2012

**Transaction ID : A2012-502992**

Amount of Each Receipt this Period  

5.00
------

**B. BARBARA K ANGAIK**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 1233

City BETHEL	State AK	Zip Code 99559
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FEC ID number of contributing federal political committee. **C**

Name of Employer LOWER KUSKOKWIM SCHOOL DIST	Occupation CLASSROOM TEACHER
---	---------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2012

**Transaction ID : A2012-502993**

Amount of Each Receipt this Period  

5.00
------

**C. BARBARA K ANGAIK**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 1233

City BETHEL	State AK	Zip Code 99559
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FEC ID number of contributing federal political committee. **C**

Name of Employer LOWER KUSKOKWIM SCHOOL DIST	Occupation CLASSROOM TEACHER
---	---------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2012

**Transaction ID : A2012-502994**

Amount of Each Receipt this Period  

5.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>15.00</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: PAGE 10 OF 70  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)  
**A. MARY K BELL**

Mailing Address 1521 LILY LN

City WISCONSIN RAPIDS	State WI	Zip Code 54494
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FEC ID number of contributing federal political committee. **C**

Name of Employer WISCONSIN RAPIDS SCH DIST	Occupation LIBRARIAN/MEDIA SPCLIST
---	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	15	/	2012

**Transaction ID : A2012-513925**

Amount of Each Receipt this Period  
10.00

PAYROLL DEDUCTION

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

Mailing Address 1521 LILY LN

City WISCONSIN RAPIDS	State WI	Zip Code 54494
--------------------------	-------------	-------------------

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

Name of Employer WISCONSIN RAPIDS SCH DIST	Occupation LIBRARIAN/MEDIA SPCLIST
---	---------------------------------------

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
02	/	17	/	2012

**Transaction ID : A2012-503146**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 1521 LILY LN

City WISCONSIN RAPIDS	State WI	Zip Code 54494
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FEC ID number of contributing federal political committee. **C**

Name of Employer WISCONSIN RAPIDS SCH DIST	Occupation LIBRARIAN/MEDIA SPCLIST
---	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
290.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	29	/	2012

**Transaction ID : A2012-513926**

Amount of Each Receipt this Period  
10.00

PAYROLL DEDUCTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	70.00
<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: (check only one)	PAGE 11 OF 70
	<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. CHRIS H BERN**  
Full Name (Last, First, Middle Initial)

Mailing Address 321 E MARION ST

City KNOXVILLE State IA Zip Code 50138

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

Name of Employer KNOXVILLE COMM SCHOOL DISTRICT Occupation CLASSROOM TEACHER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 505.00

Date of Receipt 02 / 13 / 2012  
**Transaction ID : A2012-502321**

Amount of Each Receipt this Period 5.00

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

Mailing Address 66 EVERGREEN CIR

City WEST FARGO State ND Zip Code 58078

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

Name of Employer WEST FARGO 6 Occupation CLASSROOM TEACHER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 202.50

Date of Receipt 02 / 08 / 2012  
**Transaction ID : A2012-513382**

Amount of Each Receipt this Period 2.50

PAYROLL DEDUCTION

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

Mailing Address 66 EVERGREEN CIR

City WEST FARGO State ND Zip Code 58078

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

Name of Employer WEST FARGO 6 Occupation CLASSROOM TEACHER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt 02 / 27 / 2012  
**Transaction ID : A2012-513383**

Amount of Each Receipt this Period 2.50

PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 10.00

**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 12 OF 70  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)  
**A. ABBY P BEYTIN**

Mailing Address 710 CHURCH RD

City REISTERSTOWN State MD Zip Code 21136

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

Name of Employer BALTIMORE COUNTY PUBLIC SCHOOLS Occupation CLASSROOM TEACHER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **206.67**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 23 / 2012**

Transaction ID : **A2012-524782**

Amount of Each Receipt this Period  
**6.67**

PAYROLL DEDUCTION

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

Mailing Address RR 2 BOX 3016

City WINSLOW State ME Zip Code 04901

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

Name of Employer BANGOR AREA SD Occupation CLASSROOM TEACHER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **215.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 17 / 2012**

Transaction ID : **A2012-502618**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address RR 2 BOX 3016

City WINSLOW State ME Zip Code 04901

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

Name of Employer BANGOR AREA SD Occupation CLASSROOM TEACHER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 21 / 2012**

Transaction ID : **A2012-524909**

Amount of Each Receipt this Period  
**15.00**

PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **71.67**

**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 13 OF 70  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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. Kathleen N Bonfoey**  
Full Name (Last, First, Middle Initial)  
Mailing Address 22 Marblegate Ct  
City Waynesville State NC Zip Code 28785  
FEC ID number of contributing federal political committee. **C**  
Name of Employer HAYWOOD COUNTY SCHOOL DISTRICT Occupation Classroom Teacher  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 512.00

Date of Receipt  
MM / DD / YYYY  
02 / 08 / 2012  
**Transaction ID : A2012-503269**  
Amount of Each Receipt this Period  
250.00

**B. Kathleen N Bonfoey**  
Full Name (Last, First, Middle Initial)  
Mailing Address 22 Marblegate Ct  
City Waynesville State NC Zip Code 28785  
FEC ID number of contributing federal political committee. **C**  
Name of Employer HAYWOOD COUNTY SCHOOL DISTRICT Occupation Classroom Teacher  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 512.00

Date of Receipt  
MM / DD / YYYY  
02 / 08 / 2012  
**Transaction ID : A2012-503270**  
Amount of Each Receipt this Period  
250.00

**C. Kathleen N Bonfoey**  
Full Name (Last, First, Middle Initial)  
Mailing Address 22 Marblegate Ct  
City Waynesville State NC Zip Code 28785  
FEC ID number of contributing federal political committee. **C**  
Name of Employer HAYWOOD COUNTY SCHOOL DISTRICT Occupation Classroom Teacher  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 524.00

Date of Receipt  
MM / DD / YYYY  
02 / 17 / 2012  
**Transaction ID : A2012-503268**  
Amount of Each Receipt this Period  
12.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 512.00  
**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 14 OF 70  
(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. CATHERINE A BOUDREAU**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 140 CLARENDON ST APT 1209  
 City BOSTON State MA Zip Code 02116  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer COMMONWEALTH OF MASSACHUSETTS Occupation PROFESSOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 02 / 17 / 2012  
**Transaction ID : A2012-503781**  
 Amount of Each Receipt this Period 50.00

**B. FRANK A BURGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2806 HOGAN CIR  
 City FENTON State MI Zip Code 48430  
 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 ▼ 240.00

Date of Receipt 02 / 23 / 2012  
**Transaction ID : A2012-522576**  
 Amount of Each Receipt this Period 40.00  
 PAYROLL DEDUCTION

**C. LEE E CAMPBELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 426 ENGINEER ST  
 City CORBIN State KY Zip Code 40701-1076  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer KNOX COUNTY SCHOOL DISTRICT Occupation FIRST REQUEST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 01 / 2012  
**Transaction ID : A2012-504462**  
 Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 190.00  
**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 70  
(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**

Full Name (Last, First, Middle Initial)  
**A. LEE E CAMPBELL**

Mailing Address 426 ENGINEER ST

City State Zip Code  
 CORBIN KY 40701-1076

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

Name of Employer Occupation  
 KNOX COUNTY SCHOOL DISTRICT FIRST REQUEST

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  
 02 / 01 / 2012  
**Transaction ID : A2012-504463**

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 17TH ASG CM UNIT 45013  
 BOX 2966

City State Zip Code  
 APO ZZ 96338

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

Name of Employer Occupation  
 DEPT OF DEFENSE TEACHER

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 900.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 01 / 2012  
**Transaction ID : A2012-503221**

Amount of Each Receipt this Period  
 100.00

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

Mailing Address 17TH ASG CM UNIT 45013  
 BOX 2966

City State Zip Code  
 APO ZZ 96338

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

Name of Employer Occupation  
 DEPT OF DEFENSE TEACHER

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 900.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 01 / 2012  
**Transaction ID : A2012-503222**

Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 450.00

**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 16 OF 70
<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) <b>A. SID L CHAPMAN</b>		Date of Receipt MM / DD / YYYY 02 / 05 / 2012 <b>Transaction ID : A2012-502363</b>
Mailing Address 1112 MAPLE DR		Amount of Each Receipt this Period 100.00
City GRIFFIN	State GA	Zip Code 30224-4944
FEC ID number of contributing federal political committee. C	Name of Employer CLAYTON COUNTY SCHOOL DISTRICT	
Occupation CLASSROOM TEACHER		Aggregate Year-to-Date ▼ 201.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. SID L CHAPMAN</b>		Date of Receipt MM / DD / YYYY 02 / 05 / 2012 <b>Transaction ID : A2012-502361</b>
Mailing Address 1112 MAPLE DR		Amount of Each Receipt this Period 25.00
City GRIFFIN	State GA	Zip Code 30224-4944
FEC ID number of contributing federal political committee. C	Name of Employer CLAYTON COUNTY SCHOOL DISTRICT	
Occupation CLASSROOM TEACHER		Aggregate Year-to-Date ▼ 201.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. SID L CHAPMAN</b>		Date of Receipt MM / DD / YYYY 02 / 05 / 2012 <b>Transaction ID : A2012-502362</b>
Mailing Address 1112 MAPLE DR		Amount of Each Receipt this Period 76.00
City GRIFFIN	State GA	Zip Code 30224-4944
FEC ID number of contributing federal political committee. C	Name of Employer CLAYTON COUNTY SCHOOL DISTRICT	
Occupation CLASSROOM TEACHER		Aggregate Year-to-Date ▼ 201.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	201.00
<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: (check only one)	PAGE 17 OF 70
	<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 E CHASE**  
Full Name (Last, First, Middle Initial)

Mailing Address 1201 16TH ST NW

City WASHINGTON State DC Zip Code 20036-3207

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

Name of Employer NATIONAL EDUCATION ASSOCIATION Occupation ORGANIZATIONAL SPECIALIST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
02 / 03 / 2012  
Transaction ID : **A2012-514634**

Amount of Each Receipt this Period  
20.00

PAYROLL DEDUCTION

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

Mailing Address 1201 16TH ST NW

City WASHINGTON State DC Zip Code 20036-3207

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

Name of Employer NATIONAL EDUCATION ASSOCIATION Occupation ORGANIZATIONAL SPECIALIST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt  
02 / 21 / 2012  
Transaction ID : **A2012-514635**

Amount of Each Receipt this Period  
20.00

PAYROLL DEDUCTION

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

Mailing Address 3254 XERXES AVE N

City MINNEAPOLIS State MN Zip Code 55412-2229

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

Name of Employer ST PAUL PUBLIC SCHOOL Occupation EDUCATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
02 / 17 / 2012  
Transaction ID : **A2012-537225**

Amount of Each Receipt this Period  
15.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 55.00

**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 18 OF 70
	<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) <b>A. Noemi Cuadrado</b>			Date of Receipt
Mailing Address Psc 477 Box 38			<input type="text" value="02"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>
City	State	Zip Code	<b>Transaction ID : A2012-502254</b>
Fpo	ZZ	96306	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="100.00"/>
Name of Employer	Occupation		
DEPT OF DEFENSE	Classroom Teacher		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="225.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. THADDEUS DAISE</b>			Date of Receipt
Mailing Address 126 W ST NW			<input type="text" value="02"/> / <input type="text" value="21"/> / <input type="text" value="2012"/>
City	State	Zip Code	<b>Transaction ID : A2012-524273</b>
WASHINGTON	DC	20001-1619	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="57.70"/>
Name of Employer	Occupation		
NATIONAL EDUCATION ASSOCIATION	MANAGER D		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="230.80"/>		
<input type="checkbox"/> Other (specify) ▼			

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial) <b>C. TIMOTHY C DEDMAN</b>			Date of Receipt
Mailing Address 65 HOLLY LN			<input type="text" value="02"/> / <input type="text" value="03"/> / <input type="text" value="2012"/>
City	State	Zip Code	<b>Transaction ID : A2012-522458</b>
ETTERS	PA	17319-9248	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="75.00"/>
Name of Employer	Occupation		
NATIONAL EDUCATION ASSOCIATION	ORGANIZATIONAL SPECIALIST		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="225.00"/>		
<input type="checkbox"/> Other (specify) ▼			

PAYROLL DEDUCTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="232.70"/>
<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 19 OF 70
	<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. TIMOTHY C DEDMAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 65 HOLLY LN

City ETTERS State PA Zip Code 17319-9248

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

Name of Employer NATIONAL EDUCATION ASSOCIATION Occupation ORGANIZATIONAL SPECIALIST

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  
02 / 21 / 2012

**Transaction ID : A2012-522459**

Amount of Each Receipt this Period  
75.00

PAYROLL DEDUCTION

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

Mailing Address 2889 S NEWARK PL

City AURORA State CO Zip Code 80014

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

Name of Employer CHERRY CREEK 5 Occupation 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  
02 / 17 / 2012

**Transaction ID : A2012-503451**

Amount of Each Receipt this Period  
40.00

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

Mailing Address 2889 S NEWARK PL

City AURORA State CO Zip Code 80014

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

Name of Employer CHERRY CREEK 5 Occupation 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  
02 / 17 / 2012

**Transaction ID : A2012-503450**

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 165.00

**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 20 OF 70
	<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. DAKOTA DRAPER**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1021 2ND ST N  
City FARGO State ND Zip Code 58102  
FEC ID number of contributing federal political committee. **C**  
Name of Employer FARGO 1 Occupation CLASSROOM TEACHER  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **350.00**

Date of Receipt **02 / 17 / 2012**  
**Transaction ID : A2012-504047**  
Amount of Each Receipt this Period **50.00**

**B. Jan M Enstrom**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1427 S 21st St  
City Lincoln State NE Zip Code 68502  
FEC ID number of contributing federal political committee. **C**  
Name of Employer LINCOLN PUBLIC SCHOOLS Occupation CLASSROOM TEACHER  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **203.00**

Date of Receipt **02 / 06 / 2012**  
**Transaction ID : A2012-502494**  
Amount of Each Receipt this Period **100.00**

**C. Jan M Enstrom**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1427 S 21st St  
City Lincoln State NE Zip Code 68502  
FEC ID number of contributing federal political committee. **C**  
Name of Employer LINCOLN PUBLIC SCHOOLS Occupation CLASSROOM TEACHER  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **203.00**

Date of Receipt **02 / 06 / 2012**  
**Transaction ID : A2012-502495**  
Amount of Each Receipt this Period **100.00**

**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: (check only one)	PAGE 21 OF 70
	<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. LILY L ESKELSEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 1819 19th Street NW #2

City WASHINGTON State DC Zip Code 20036

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

Name of Employer NATIONAL EDUCATION ASSOCIATION Occupation VICE PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **515.00**

Date of Receipt **02 / 02 / 2012**

**Transaction ID : A2012-502207**

Amount of Each Receipt this Period **5.00**

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

Mailing Address 1819 19th Street NW #2

City WASHINGTON State DC Zip Code 20036

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

Name of Employer NATIONAL EDUCATION ASSOCIATION Occupation VICE PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **515.00**

Date of Receipt **02 / 02 / 2012**

**Transaction ID : A2012-502208**

Amount of Each Receipt this Period **5.00**

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

Mailing Address 2448 WILLOW GROVE RD

City CAMDEN WYOMING State DE Zip Code 19934-3206

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

Name of Employer CAPITAL SCHOOL DISTRICT Occupation TEACHER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **203.77**

Date of Receipt **02 / 17 / 2012**

**Transaction ID : A2012-502626**

Amount of Each Receipt this Period **100.00**

**SUBTOTAL** of Receipts This Page (optional)..... **110.00**

**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 22 OF 70
<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. MARY J FAUST**  
Full Name (Last, First, Middle Initial)

Mailing Address 2448 WILLOW GROVE RD

City CAMDEN WYOMING	State DE	Zip Code 19934-3206
------------------------	-------------	------------------------

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

Name of Employer CAPITAL SCHOOL DISTRICT	Occupation TEACHER
---	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
238.36

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	21	/	2012

**Transaction ID : A2012-536035**

Amount of Each Receipt this Period  

34.59
-------

PAYROLL DEDUCTION

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

Mailing Address 2448 WILLOW GROVE RD

City CAMDEN WYOMING	State DE	Zip Code 19934-3206
------------------------	-------------	------------------------

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

Name of Employer CAPITAL SCHOOL DISTRICT	Occupation TEACHER
---	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
288.36

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	22	/	2012

**Transaction ID : A2012-502625**

Amount of Each Receipt this Period  

50.00
-------

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

Mailing Address 5164 E 129TH PL

City THORNTON	State CO	Zip Code 80241-3754
------------------	-------------	------------------------

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

Name of Employer DENVER COUNTY	Occupation CLASSROOM TEACHER
-----------------------------------	---------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
315.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	17	/	2012

**Transaction ID : A2012-537209**

Amount of Each Receipt this Period  

40.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	124.59
<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 23 OF 70  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)  
**A. MARY E GRUBER**

Mailing Address 10179 STRAWFLOWER LN

City MANASSAS	State VA	Zip Code 20110
------------------	-------------	-------------------

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

Name of Employer PRINCE WILLIAM CNTY PUBLIC SCH	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
02	/	01	/	2012

**Transaction ID : A2012-502598**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 10179 STRAWFLOWER LN

City MANASSAS	State VA	Zip Code 20110
------------------	-------------	-------------------

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

Name of Employer PRINCE WILLIAM CNTY PUBLIC SCH	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
02	/	01	/	2012

**Transaction ID : A2012-502597**

Amount of Each Receipt this Period  
105.00

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

Mailing Address 10179 STRAWFLOWER LN

City MANASSAS	State VA	Zip Code 20110
------------------	-------------	-------------------

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

Name of Employer PRINCE WILLIAM CNTY PUBLIC SCH	Occupation CLASSROOM TEACHER
--	---------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
219.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	15	/	2012

**Transaction ID : A2012-502595**

Amount of Each Receipt this Period  
7.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	212.00
<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 24 OF 70  
(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. MARY E GRUBER**

Mailing Address 10179 STRAWFLOWER LN

City State Zip Code  
 MANASSAS VA 20110

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

Name of Employer Occupation  
 PRINCE WILLIAM CNTY PUBLIC SCH CLASSROOM TEACHER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 219.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2012

**Transaction ID : A2012-502596**

Amount of Each Receipt this Period  
 7.00

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

Mailing Address 22 GREENWICH DR

City State Zip Code  
 WESTAMPTON NJ 08060

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

Name of Employer Occupation  
 HAINESPORT TWP 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  
 02 / 04 / 2012

**Transaction ID : A2012-502762**

Amount of Each Receipt this Period  
 200.00

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

Mailing Address 22 GREENWICH DR

City State Zip Code  
 WESTAMPTON NJ 08060

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

Name of Employer Occupation  
 HAINESPORT TWP 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  
 02 / 04 / 2012

**Transaction ID : A2012-502763**

Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 307.00

**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 70  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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. TONI E GUERRA**

Mailing Address **22 GREENWICH DR**

City **WESTAMPTON** State **NJ** Zip Code **08060**

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

Name of Employer **HAINESPORT TWP** Occupation **TEACHER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **305.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	17	/	2012

**Transaction ID : A2012-502761**

Amount of Each Receipt this Period  

5.00
------

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

Mailing Address **PO BOX 1195**

City **LAKE SHERWOOD** State **MO** Zip Code **63357**

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

Name of Employer **Missouri NEA** Occupation **PRESIDENT**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **515.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	13	/	2012

**Transaction ID : A2012-503078**

Amount of Each Receipt this Period  

5.00
------

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

Mailing Address **PO BOX 1195**

City **LAKE SHERWOOD** State **MO** Zip Code **63357**

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

Name of Employer **Missouri NEA** Occupation **PRESIDENT**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **515.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	13	/	2012

**Transaction ID : A2012-503079**

Amount of Each Receipt this Period  

5.00
------

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

15.00
-------

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

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**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 26 OF 70
	<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. CHRISTINE L GUNTHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 1195  
 City LAKE SHERWOOD State MO Zip Code 63357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Missouri NEA Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **515.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 13 / 2012**  
**Transaction ID : A2012-503080**  
 Amount of Each Receipt this Period  
**5.00**

**B. KENNETH B HAINES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11400 SEQUOIA LN  
 City BELTSVILLE State MD Zip Code 20705  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PRINCE GEORGE COUNTY PUBLIC SCHOOLS Occupation CLASSROOM TEACHER  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1233.35**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 01 / 2012**  
**Transaction ID : A2012-502258**  
 Amount of Each Receipt this Period  
**500.00**

**C. KENNETH B HAINES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11400 SEQUOIA LN  
 City BELTSVILLE State MD Zip Code 20705  
 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 **1433.35**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 17 / 2012**  
**Transaction ID : A2012-502257**  
 Amount of Each Receipt this Period  
**200.00**

**SUBTOTAL** of Receipts This Page (optional)..... **705.00**  
**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 27 OF 70  
(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  
 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 ▼ 1500.05

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 23 / 2012  
**Transaction ID : A2012-519139**  
 Amount of Each Receipt this Period  
 66.70  
 PAYROLL DEDUCTION

**B. STEPHEN HENRY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3514 KENNEDY AVE  
 City NASHVILLE State TN Zip Code 37216  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NASHVILLE-DAVIDSON COUNTY SD 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  
 02 / 05 / 2012  
**Transaction ID : A2012-503031**  
 Amount of Each Receipt this Period  
 100.00

**C. STEPHEN HENRY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3514 KENNEDY AVE  
 City NASHVILLE State TN Zip Code 37216  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NASHVILLE-DAVIDSON COUNTY SD 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  
 02 / 05 / 2012  
**Transaction ID : A2012-503030**  
 Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 466.70  
**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: (check only one)	PAGE 28 OF 70
	<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. WILLIAM M HOFFMANN**  
Full Name (Last, First, Middle Initial)

Mailing Address 5584 LITTLE MASTENS CORNER RD

City FELTON	State DE	Zip Code 19943
----------------	-------------	-------------------

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

Name of Employer CAESAR RODNEY SCHOOL DISTRICT	Occupation TCHR/INSTRUCT/PRG ASST
---	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **231.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	02	/	2012

**Transaction ID : A2012-503805**

Amount of Each Receipt this Period  

100.00	100.00	31.00
--------	--------	-------

**60.00**

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

Mailing Address 5584 LITTLE MASTENS CORNER RD

City FELTON	State DE	Zip Code 19943
----------------	-------------	-------------------

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

Name of Employer CAESAR RODNEY SCHOOL DISTRICT	Occupation TCHR/INSTRUCT/PRG ASST
---	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **251.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	08	/	2012

**Transaction ID : A2012-503804**

Amount of Each Receipt this Period  

100.00	100.00	51.00
--------	--------	-------

**20.00**

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

Mailing Address 5584 LITTLE MASTENS CORNER RD

City FELTON	State DE	Zip Code 19943
----------------	-------------	-------------------

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

Name of Employer CAESAR RODNEY SCHOOL DISTRICT	Occupation TCHR/INSTRUCT/PRG ASST
---	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **274.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2012

**Transaction ID : A2012-517964**

Amount of Each Receipt this Period  

100.00	100.00	74.00
--------	--------	-------

**23.00**

PAYROLL DEDUCTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>103.00</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 29 OF 70
	<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. WILLIAM M HOFFMANN**  
Full Name (Last, First, Middle Initial)

Mailing Address 5584 LITTLE MASTENS CORNER RD

City	State	Zip Code
FELTON	DE	19943

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

Name of Employer	Occupation
CAESAR RODNEY SCHOOL DISTRICT	TCHR/INSTRUCT/PRG ASST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **329.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	17	/	2012

**Transaction ID : A2012-503803**

Amount of Each Receipt this Period  

30.00
-------

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

Mailing Address 5584 LITTLE MASTENS CORNER RD

City	State	Zip Code
FELTON	DE	19943

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

Name of Employer	Occupation
CAESAR RODNEY SCHOOL DISTRICT	TCHR/INSTRUCT/PRG ASST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **329.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	17	/	2012

**Transaction ID : A2012-503802**

Amount of Each Receipt this Period  

25.00
-------

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

Mailing Address 5584 LITTLE MASTENS CORNER RD

City	State	Zip Code
FELTON	DE	19943

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

Name of Employer	Occupation
CAESAR RODNEY SCHOOL DISTRICT	TCHR/INSTRUCT/PRG ASST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **352.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	21	/	2012

**Transaction ID : A2012-517965**

Amount of Each Receipt this Period  

23.00
-------

PAYROLL DEDUCTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>78.00</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 30 OF 70
	<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

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 ▼ **374.00**

Date of Receipt  
MM / DD / YYYY  
**02 / 17 / 2012**

**Transaction ID : A2012-503664**

Amount of Each Receipt this Period  
**12.00**

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

Mailing Address 745 OLD WILMINGTON RD

City HOCKESSIN State DE Zip Code 19707

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 ▼ **474.79**

Date of Receipt  
MM / DD / YYYY  
**02 / 08 / 2012**

**Transaction ID : A2012-503830**

Amount of Each Receipt this Period  
**20.00**

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

Mailing Address 745 OLD WILMINGTON RD

City HOCKESSIN State DE Zip Code 19707

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 ▼ **504.58**

Date of Receipt  
MM / DD / YYYY  
**02 / 10 / 2012**

**Transaction ID : A2012-524444**

Amount of Each Receipt this Period  
**29.79**

PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... **61.79**

**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 70
	(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. FREDERIKA S JENNER**  
Full Name (Last, First, Middle Initial)

Mailing Address 745 OLD WILMINGTON RD

City HOCKESSIN State DE Zip Code 19707

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 ▼ 509.58

Date of Receipt 02 / 13 / 2012  
**Transaction ID : A2012-503829**

Amount of Each Receipt this Period 5.00

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

Mailing Address 1239 N SUNNYSLOPE DR

City RACINE State WI Zip Code 53406

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 ▼ 280.00

Date of Receipt 02 / 15 / 2012  
**Transaction ID : A2012-513898**

Amount of Each Receipt this Period 10.00

PAYROLL DEDUCTION

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

Mailing Address 1239 N SUNNYSLOPE DR

City RACINE State WI Zip Code 53406

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 ▼ 290.00

Date of Receipt 02 / 29 / 2012  
**Transaction ID : A2012-513899**

Amount of Each Receipt this Period 10.00

PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 25.00

**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 32 OF 70
	<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 D

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  
 02 / 03 / 2012  
**Transaction ID : A2012-551642**

Amount of Each Receipt this Period  
 80.00

PAYROLL DEDUCTION

**B. 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 D

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 21 / 2012  
**Transaction ID : A2012-551643**

Amount of Each Receipt this Period  
 80.00

PAYROLL DEDUCTION

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

Mailing Address 2231 ONTARIO RD NW  
APT 22

City WASHINGTON State DC Zip Code 20009-2664

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 ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 03 / 2012  
**Transaction ID : A2012-533910**

Amount of Each Receipt this Period  
 100.00

PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 260.00

**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 33 OF 70
	<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. HARRY LAWSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 2231 ONTARIO RD NW  
APT 22

City WASHINGTON State DC Zip Code 20009-2664

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 ▼ 400.00

Date of Receipt  
02 / 21 / 2012  
Transaction ID : **A2012-533911**

Amount of Each Receipt this Period  
100.00

PAYROLL DEDUCTION

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

Mailing Address 8846 WESLEY PL

City JONESBORO State GA Zip Code 30238-4560

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

Name of Employer CLAYTON COUNTY SCHOOL DISTRICT Occupation BUS/TRUCK/VAN DRIVER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
02 / 05 / 2012  
Transaction ID : **A2012-537570**

Amount of Each Receipt this Period  
225.00

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

Mailing Address 8846 WESLEY PL

City JONESBORO State GA Zip Code 30238-4560

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

Name of Employer CLAYTON COUNTY SCHOOL DISTRICT Occupation BUS/TRUCK/VAN DRIVER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
02 / 05 / 2012  
Transaction ID : **A2012-537571**

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	375.00
<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: (check only one)	PAGE 34 OF 70
	<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. GRACE E LEAVITT**  
Full Name (Last, First, Middle Initial)

Mailing Address 2 LEAVITT RD

City RAYMOND State ME Zip Code 04071

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

Name of Employer SAD 51 CUMBERLAND Occupation Classroom Teacher

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  
02 / 04 / 2012

**Transaction ID : A2012-503916**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 2 LEAVITT RD

City RAYMOND State ME Zip Code 04071

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

Name of Employer SAD 51 CUMBERLAND Occupation Classroom Teacher

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  
02 / 04 / 2012

**Transaction ID : A2012-503917**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 2 LEAVITT RD

City RAYMOND State ME Zip Code 04071

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

Name of Employer SAD 51 CUMBERLAND Occupation Classroom Teacher

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  
02 / 04 / 2012

**Transaction ID : A2012-503918**

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 325.00

**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 35 OF 70
	<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. GRACE E LEAVITT**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2 LEAVITT RD  
City RAYMOND State ME Zip Code 04071  
FEC ID number of contributing federal political committee. **C**  
Name of Employer SAD 51 CUMBERLAND Occupation Classroom Teacher  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 410.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2012  
**Transaction ID : A2012-503915**  
Amount of Each Receipt this Period  
50.00

**B. GRACE E LEAVITT**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2 LEAVITT RD  
City RAYMOND State ME Zip Code 04071  
FEC ID number of contributing federal political committee. **C**  
Name of Employer SAD 51 CUMBERLAND Occupation Classroom Teacher  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2012  
**Transaction ID : A2012-519963**  
Amount of Each Receipt this Period  
10.00  
**PAYROLL DEDUCTION**

**C. MARY K LINDQUIST**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4212 EASTERN AVE N  
City SEATTLE State WA Zip Code 98103  
FEC ID number of contributing federal political committee. **C**  
Name of Employer MERCER ISLAND SD #400 Occupation CLASSROOM TEACHER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 502.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2012  
**Transaction ID : A2012-502133**  
Amount of Each Receipt this Period  
500.00

**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 36 OF 70  
(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. ANDREW LINEBAUGH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1201 16TH STREET NW  
 City WASHINGTON State DC Zip Code 20036  
 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 ▼ 210.00

Date of Receipt 02 / 03 / 2012  
**Transaction ID : A2012-520696**  
 Amount of Each Receipt this Period 70.00  
 PAYROLL DEDUCTION

**B. ANDREW LINEBAUGH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1201 16TH STREET NW  
 City WASHINGTON State DC Zip Code 20036  
 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 ▼ 280.00

Date of Receipt 02 / 21 / 2012  
**Transaction ID : A2012-520697**  
 Amount of Each Receipt this Period 70.00  
 PAYROLL DEDUCTION

**C. RONALD E MARTIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3320 GARNER ST  
 City EAU CLAIRE State WI Zip Code 54701  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer EAU CLAIRE PUBLIC SCHOOLS Occupation CLASSROOM TEACHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 01 / 2012  
**Transaction ID : A2012-503212**  
 Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 190.00  
**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 37 OF 70  
(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. SHERYL D MATHIS**

Mailing Address 2456 SW KINGS CT

City State Zip Code  
 TOPEKA KS 66614

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

Name of Employer Occupation  
 KANSAS NEA ASSOCIATE EXECUTIVE DIRECTOR

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 505.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 17 / 2012  
**Transaction ID : A2012-503536**

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 2456 SW KINGS CT

City State Zip Code  
 TOPEKA KS 66614

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

Name of Employer Occupation  
 KANSAS NEA ASSOCIATE EXECUTIVE DIRECTOR

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 505.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 17 / 2012  
**Transaction ID : A2012-503537**

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 7716 81st St NE

City State Zip Code  
 Marysville WA 98270

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

Name of Employer Occupation  
 EVERETT SD #2 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  
 02 / 26 / 2012  
**Transaction ID : A2012-502203**

Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 350.00

**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 38 OF 70
	<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) <b>A. BONNIE A MEHLBRECH</b>		Date of Receipt
Mailing Address 205 W 40TH ST		<input type="text" value="02"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code
SIOUX FALLS	SD	57105
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : <b>A2012-503494</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
SIOUX FALLS 49-5	CLASSROOM TEACHER	<input type="text" value="400.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="590.00"/>	

Full Name (Last, First, Middle Initial) <b>B. BONNIE A MEHLBRECH</b>		Date of Receipt
Mailing Address 205 W 40TH ST		<input type="text" value="02"/> / <input type="text" value="17"/> / <input type="text" value="2012"/>
City	State	Zip Code
SIOUX FALLS	SD	57105
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : <b>A2012-503493</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
SIOUX FALLS 49-5	CLASSROOM TEACHER	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="640.00"/>	

Full Name (Last, First, Middle Initial) <b>C. DONNA I MOREY</b>		Date of Receipt
Mailing Address 7800 EVERGREEN DR		<input type="text" value="02"/> / <input type="text" value="05"/> / <input type="text" value="2012"/>
City	State	Zip Code
LITTLE ROCK	AR	72227
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : <b>A2012-503882</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
LITTLE ROCK SCHOOL DISTRICT	CLASSROOM TEACHER	<input type="text" value="150.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="430.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="240.00"/>
<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 39 OF 70
<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) <b>A. DONNA I MOREY</b>		Date of Receipt MM / DD / YYYY 02 / 05 / 2012 <b>Transaction ID : A2012-503883</b>
Mailing Address 7800 EVERGREEN DR		Amount of Each Receipt this Period 160.00
City LITTLE ROCK	State AR	Zip Code 72227
FEC ID number of contributing federal political committee. C		
Name of Employer LITTLE ROCK SCHOOL DISTRICT	Occupation CLASSROOM TEACHER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 430.00	

Full Name (Last, First, Middle Initial) <b>B. DONNA I MOREY</b>		Date of Receipt MM / DD / YYYY 02 / 17 / 2012 <b>Transaction ID : A2012-503880</b>
Mailing Address 7800 EVERGREEN DR		Amount of Each Receipt this Period 50.00
City LITTLE ROCK	State AR	Zip Code 72227
FEC ID number of contributing federal political committee. C		
Name of Employer LITTLE ROCK SCHOOL DISTRICT	Occupation CLASSROOM TEACHER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. DONNA I MOREY</b>		Date of Receipt MM / DD / YYYY 02 / 17 / 2012 <b>Transaction ID : A2012-503881</b>
Mailing Address 7800 EVERGREEN DR		Amount of Each Receipt this Period 20.00
City LITTLE ROCK	State AR	Zip Code 72227
FEC ID number of contributing federal political committee. C		
Name of Employer LITTLE ROCK SCHOOL DISTRICT	Occupation CLASSROOM TEACHER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	230.00
<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: (check only one)	PAGE 40 OF 70
	<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. PRINCESS R MOSS**

Mailing Address 4212 LEWISTON RD

City State Zip Code  
BUMPASS VA 23024

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

Name of Employer Occupation  
NATIONAL EDUCATION ASSOCIATION EXECUTIVE COMMITTEE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
211.00

Date of Receipt  
MM / DD / YYYY  
02 / 17 / 2012

**Transaction ID : A2012-503610**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 4212 LEWISTON RD

City State Zip Code  
BUMPASS VA 23024

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

Name of Employer Occupation  
NATIONAL EDUCATION ASSOCIATION EXECUTIVE COMMITTEE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
217.00

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2012

**Transaction ID : A2012-503609**

Amount of Each Receipt this Period  
6.00

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

Mailing Address 14247 PIERCE ST NE

City State Zip Code  
HAM LAKE MN 55304

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

Name of Employer Occupation  
BROOKLYN CENTER CLASSROOM TEACHER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
605.00

Date of Receipt  
MM / DD / YYYY  
02 / 13 / 2012

**Transaction ID : A2012-503392**

Amount of Each Receipt this Period  
5.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 61.00

**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 41 OF 70  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)  
**A. PAUL M MUELLER**

Mailing Address 14247 PIERCE ST NE

City State Zip Code  
HAM LAKE MN 55304

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

Name of Employer Occupation  
BROOKLYN CENTER CLASSROOM TEACHER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
655.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2012

**Transaction ID : A2012-503391**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**B. LISA NENTL-BLOOM**

Mailing Address 6149 SIOUX TRL

City State Zip Code  
NORTH BRANCH MN 55056-6945

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 ▼  
450.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2012

**Transaction ID : A2012-557804**

Amount of Each Receipt this Period  
50.00

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)  
**C. LISA NENTL-BLOOM**

Mailing Address 6149 SIOUX TRL

City State Zip Code  
NORTH BRANCH MN 55056-6945

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 ▼  
500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2012

**Transaction ID : A2012-557805**

Amount of Each Receipt this Period  
50.00

PAYROLL DEDUCTION

**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 42 OF 70  
(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. THOMAS NICHOLAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 48 ECHO DR  
 City VERNON State CT Zip Code 06066  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MANCHESTER SCHOOL DISTRICT Occupation COOK/FOOD PREP WRKR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 17 / 2012  
**Transaction ID : A2012-502139**  
 Amount of Each Receipt this Period  
 50.00

**B. THOMAS NICHOLAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 48 ECHO DR  
 City VERNON State CT Zip Code 06066  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MANCHESTER SCHOOL DISTRICT Occupation COOK/FOOD PREP WRKR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 17 / 2012  
**Transaction ID : A2012-502140**  
 Amount of Each Receipt this Period  
 50.00

**C. THOMAS NICHOLAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 48 ECHO DR  
 City VERNON State CT Zip Code 06066  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MANCHESTER SCHOOL DISTRICT Occupation COOK/FOOD PREP WRKR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 17 / 2012  
**Transaction ID : A2012-502141**  
 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: (check only one)	PAGE 43 OF 70
	<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. SHARRON K OXENDINE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1051 PALMER CT  
 City LEXINGTON State KY Zip Code 40511  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Clark County Education Assoc Occupation CLASSROOM TEACHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 09 / 2012  
**Transaction ID : A2012-503293**  
 Amount of Each Receipt this Period  
 5.00

**B. TIM PARKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1716 REED CIR  
 City FAIRBANKS State AK Zip Code 99709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FAIRBANKS NORTH STAR BORO S/D 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  
 02 / 01 / 2012  
**Transaction ID : A2012-502167**  
 Amount of Each Receipt this Period  
 50.00

**C. TIM PARKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1716 REED CIR  
 City FAIRBANKS State AK Zip Code 99709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FAIRBANKS NORTH STAR BORO S/D Occupation CLASSROOM TEACHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 27 / 2012  
**Transaction ID : A2012-502165**  
 Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 65.00  
**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 44 OF 70
	<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. TIM PARKER**  
Full Name (Last, First, Middle Initial)

Mailing Address 1716 REED CIR

City FAIRBANKS State AK Zip Code 99709

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

Name of Employer FAIRBANKS NORTH STAR BORO S/D Occupation CLASSROOM TEACHER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 27 / 2012  
**Transaction ID : A2012-502166**

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 1716 REED CIR

City FAIRBANKS State AK Zip Code 99709

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

Name of Employer FAIRBANKS NORTH STAR BORO S/D Occupation CLASSROOM TEACHER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 27 / 2012  
**Transaction ID : A2012-502164**

Amount of Each Receipt this Period  
 5.00

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

Mailing Address 608 John F Kroutil Dr

City Yukon State OK Zip Code 73099

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 ▼ 208.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2012  
**Transaction ID : A2012-513738**

Amount of Each Receipt this Period  
 16.66

PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 71.66

**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 45 OF 70
	<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. LAWRENCE PURTILL**  
Full Name (Last, First, Middle Initial)  
Mailing Address 30 LEEANN DR  
City NARRAGANSETT State RI Zip Code 02882  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NEA RHODE ISLAND Occupation PRESIDENT  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **220.00**

Date of Receipt **02 / 17 / 2012**  
**Transaction ID : A2012-506065**  
Amount of Each Receipt this Period **40.00**

**B. BILL RAABE**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1499 MASSACHUSETTS AVE NW APT 514  
City WASHINGTON State DC Zip Code 20005-2853  
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 **02 / 03 / 2012**  
**Transaction ID : A2012-527819**  
Amount of Each Receipt this Period **100.00**  
PAYROLL DEDUCTION

**C. BILL RAABE**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1499 MASSACHUSETTS AVE NW APT 514  
City WASHINGTON State DC Zip Code 20005-2853  
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 **400.00**

Date of Receipt **02 / 21 / 2012**  
**Transaction ID : A2012-527820**  
Amount of Each Receipt this Period **100.00**  
PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... **240.00**  
**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 46 OF 70  
(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. MICHAEL P RAGAN**

Mailing Address 27005 S 875 PR SE

City State Zip Code  
 KENNEWICK WA 99338

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

Name of Employer Occupation  
 KENNEWICK SD #17 CLASSROOM TEACHER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1006.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 26 / 2012

**Transaction ID : A2012-503277**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 27005 S 875 PR SE

City State Zip Code  
 KENNEWICK WA 99338

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

Name of Employer Occupation  
 KENNEWICK SD #17 CLASSROOM TEACHER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1006.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 26 / 2012

**Transaction ID : A2012-503278**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address PO BOX 961

City State Zip Code  
 EAGLE POINT OR 97524

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

Name of Employer Occupation  
 EAGLE POINT SCHOOL DIST 009 SECRETARY/STENO

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  
 02 / 26 / 2012

**Transaction ID : A2012-502128**

Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1250.00

**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 47 OF 70  
(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. JACQUELINE E RICHARDSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6721 GINA AGHA CIR  
 City LITHONIA State GA Zip Code 30038-6517  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DE KALB COUNTY SCHOOL DISTRICT Occupation CLASSROOM TEACHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 02 / 17 / 2012  
**Transaction ID : A2012-540592**  
 Amount of Each Receipt this Period 200.00

**B. JACQUELINE E RICHARDSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6721 GINA AGHA CIR  
 City LITHONIA State GA Zip Code 30038-6517  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DE KALB COUNTY SCHOOL DISTRICT Occupation CLASSROOM TEACHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 02 / 17 / 2012  
**Transaction ID : A2012-540593**  
 Amount of Each Receipt this Period 200.00

**C. KAREN ROGEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address FIRST REQUEST  
 City POMONA State CA Zip Code 91766-4762  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer POMONA UNIFIED Occupation EDUCATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 02 / 26 / 2012  
**Transaction ID : A2012-505967**  
 Amount of Each Receipt this Period 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 240.00  
**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 48 OF 70  
(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. LAURIE A SCHORNO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 60 MERIDEN ROAD  
 City State Zip Code  
 ROCKAWAY NJ 07866  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 MORRIS PLAINS BORO TEACHER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 305.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 04 / 2012  
**Transaction ID : A2012-503448**  
 Amount of Each Receipt this Period  
 50.00

**B. LAURIE A SCHORNO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 60 MERIDEN ROAD  
 City State Zip Code  
 ROCKAWAY NJ 07866  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 MORRIS PLAINS BORO TEACHER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 305.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 04 / 2012  
**Transaction ID : A2012-503449**  
 Amount of Each Receipt this Period  
 255.00

**C. ANDREW L SPAR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1 MARY ANN TER  
 City State Zip Code  
 ORMOND BEACH FL 32174  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 VOLUSIA COUNTY SCHOOL DISTRICT 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  
 02 / 05 / 2012  
**Transaction ID : A2012-504122**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 555.00  
**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 49 OF 70  
(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. JOHN C STOCKS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5608 CHESTNUT LN  
 City State Zip Code  
 MC FARLAND WI 53558-8802  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NATIONAL EDUCATION ASSOCIATION DEPUTY EXECUTIVE DIRECTOR  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 03 / 2012  
**Transaction ID : A2012-524916**  
 Amount of Each Receipt this Period  
 190.00  
 PAYROLL DEDUCTION

**B. JOHN C STOCKS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5608 CHESTNUT LN  
 City State Zip Code  
 MC FARLAND WI 53558-8802  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NATIONAL EDUCATION ASSOCIATION DEPUTY EXECUTIVE DIRECTOR  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 640.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 17 / 2012  
**Transaction ID : A2012-503038**  
 Amount of Each Receipt this Period  
 70.00

**C. JOHN C STOCKS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5608 CHESTNUT LN  
 City State Zip Code  
 MC FARLAND WI 53558-8802  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NATIONAL EDUCATION ASSOCIATION DEPUTY EXECUTIVE DIRECTOR  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 830.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 21 / 2012  
**Transaction ID : A2012-524917**  
 Amount of Each Receipt this Period  
 190.00  
 PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 450.00  
**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 50 OF 70
	<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. SHERI M STRICKLAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 102 GAWAIN RD  
 City GREENVILLE State NC Zip Code 27858  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PITT COUNTY SCHOOLS Occupation CLASSROOM TEACHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 428.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 22 / 2012  
**Transaction ID : A2012-503574**  
 Amount of Each Receipt this Period  
 14.00

**B. JACOB J SWEENEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3002 FINSEL CT  
 City OLNEY State MD Zip Code 20832-3022  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NATIONAL EDUCATION ASSOCIATION Occupation ORGANIZATIONAL SPECIALIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 04 / 2012  
**Transaction ID : A2012-537542**  
 Amount of Each Receipt this Period  
 265.00

**C. KATHRYN A VALIDO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8408 BARRINGTON RD  
 City CHEYENNE State WY Zip Code 82009  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LARAMIE CO SCHOOL DIST 01 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  
 02 / 17 / 2012  
**Transaction ID : A2012-502231**  
 Amount of Each Receipt this Period  
 40.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	319.00
<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: (check only one)	PAGE 51 OF 70
	<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. BLAKE C WEST**  
Full Name (Last, First, Middle Initial)  
Mailing Address 900 SW ROBINSON AVE APT 1901

City TOPEKA	State KS	Zip Code 66606
----------------	-------------	-------------------

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

Name of Employer BLUE VALLEY	Occupation CLASSROOM TEACHER
---------------------------------	---------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **620.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
02	/	22	/	2012

**Transaction ID : A2012-502871**

Amount of Each Receipt this Period  

10.00
-------

**B. KAREN M WHITE**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1334 WALNUT AVE

City ANNAPOLIS	State MD	Zip Code 21403-4767
-------------------	-------------	------------------------

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  

M M	/	D D	/	Y Y Y Y
02	/	03	/	2012

**Transaction ID : A2012-554791**

Amount of Each Receipt this Period  

100.00
--------

PAYROLL DEDUCTION

**C. KAREN M WHITE**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1334 WALNUT AVE

City ANNAPOLIS	State MD	Zip Code 21403-4767
-------------------	-------------	------------------------

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 ▼ **400.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
02	/	21	/	2012

**Transaction ID : A2012-554792**

Amount of Each Receipt this Period  

100.00
--------

PAYROLL DEDUCTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>210.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>11232.11</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: 2012  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State: MD District:

Date of Disbursement

MM / DD / YYYY  
02 / 08 / 2012

Transaction ID : B406213

Amount of Each Disbursement this Period

641.70

Full Name (Last, First, Middle Initial)

### B.

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

MM / DD / YYYY

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

### C.

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

MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

641.70

641.70

**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. Becerra for Congress**

Mailing Address P.O. Box 261060

City Los Angeles State CA Zip Code 90026

Purpose of Disbursement  
Contribution

011

Candidate Name

**Xavier Becerra**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: CA District: 34

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		22		2012

**Transaction ID : B405203**

Amount of Each Disbursement this Period

3000.00
---------

Full Name (Last, First, Middle Initial)

**B. Bera for Congress**

Mailing Address P. O. Box 582496

City Elk Grove State CA Zip Code 95758

Purpose of Disbursement  
Contribution

011

Candidate Name

**Amerish Bera**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: CA District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		22		2012

**Transaction ID : B405202**

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**C. McNerney for Congress**

Mailing Address 6250 Village Parkway Second Floor

City Dublin State CA Zip Code 94568

Purpose of Disbursement  
Contribution

011

Candidate Name

**Jerry McNerney**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: CA District: 11

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		22		2012

**Transaction ID : B405201**

Amount of Each Disbursement this Period

2000.00
---------

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

10000.00
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**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. Scott Peters for Congress**

Mailing Address 777 S Figuero St Ste 4050

City Los Angeles State CA Zip Code 90017

Purpose of Disbursement  
Contribution

011

Candidate Name

**Scott Peters**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: CA District: 52

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		22		2012

**Transaction ID : B405205**

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**B. Mark Takano for Congress**

Mailing Address 728 W. Edna Place

City Covina State CA Zip Code 91722

Purpose of Disbursement  
Contribution

011

Candidate Name

**Mark Takano**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: CA District: 41

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		22		2012

**Transaction ID : B405204**

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**C. Diana DeGette for Congress Inc.**

Mailing Address P.O. Box 61337

City Denver State CO Zip Code 80206

Purpose of Disbursement  
Contribution

011

Candidate Name

**Diana L DeGette**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: CO District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		17		2012

**Transaction ID : B405068**

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)..... ▶

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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. Sal Pace for Congress**

Mailing Address PO Box 1510

City Pueblo State CO Zip Code 81002

Purpose of Disbursement  
Contribution

011

Candidate Name

**Sal Pace II**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: CO District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	7		2	0	1	2

**Transaction ID : B405066**

Amount of Each Disbursement this Period

1	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Perlmutter for Congress**

Mailing Address 3440 Youngfield Street #264

City Wheat Ridge State CO Zip Code 80033

Purpose of Disbursement  
Contribution

011

Candidate Name

**Ed Perlmutter**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: CO District: 07

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	7		2	0	1	2

**Transaction ID : B405067**

Amount of Each Disbursement this Period

2	0	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Connecticut Democratic State Central Committee**

Mailing Address 330 Main Street 3rd Floor

City Hartford State CT Zip Code 06106

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State: CT District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	7		2	0	1	2

**Transaction ID : B404996**

Amount of Each Disbursement this Period

2	4	0	0	.	0	0
---	---	---	---	---	---	---

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

5	9	0	0	.	0	0
---	---	---	---	---	---	---

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

5	9	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. Committee for Hispanic Causes/BOLD PAC**

Mailing Address P.O. Box 70980

City Washington State DC Zip Code 20024

Purpose of Disbursement Contribution

011

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: DC District:

Not Applicable

Date of Disbursement

MM / DD / YYYY  
02 / 29 / 2012

Transaction ID : B405596

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Federica S. Wilson for Congress**

Mailing Address 19821 NW 2nd Avenue Box 354

City Miami Gardens State FL Zip Code 33169

Purpose of Disbursement Contribution

011

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: FL District: 17

Date of Disbursement

MM / DD / YYYY  
02 / 13 / 2012

Transaction ID : B404643

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**C. Hanabusa for Congress**

Mailing Address P.O. Box 1416

City Honolulu State HI Zip Code 96806

Purpose of Disbursement Contribution

011

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: HI District: 01

Date of Disbursement

MM / DD / YYYY  
02 / 17 / 2012

Transaction ID : B405069

Amount of Each Disbursement this Period

2000.00

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

9000.00

**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 Mazie Hirono**

Mailing Address P.O. Box 677

City Honolulu State HI Zip Code 96809

Purpose of Disbursement  
Contribution

011

Candidate Name

**Mazie Hirono**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: HI District:

Date of Disbursement

MM / DD / YYYY  
02 / 17 / 2012

**Transaction ID : B405070**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Friends of Mazie Hirono**

Mailing Address P.O. Box 677

City Honolulu State HI Zip Code 96809

Purpose of Disbursement  
Contribution

011

Candidate Name

**Mazie Hirono**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: HI District:

Date of Disbursement

MM / DD / YYYY  
02 / 17 / 2012

**Transaction ID : B405071**

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

**C. Hanneman for Congress**

Mailing Address P.O. Box 39

City Honolulu State HI Zip Code 96810

Purpose of Disbursement  
Contribution

011

Candidate Name

**Mufi Hanneman**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: HI District: 02

Date of Disbursement

MM / DD / YYYY  
02 / 22 / 2012

**Transaction ID : B405179**

Amount of Each Disbursement this Period

4000.00

**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. Christie Vilsack for Iowa**

Mailing Address PO Box 641

City Ames State IA Zip Code 50010

Purpose of Disbursement  
Contribution

011

Candidate Name

**Christie Vilsack**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: IA District: 04

Date of Disbursement

MM / DD / YYYY  
02 / 17 / 2012

**Transaction ID : B405065**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Judy Biggert for Congress**

Mailing Address P.O. Box 637

City Hinsdale State IL Zip Code 60522

Purpose of Disbursement  
Contribution

011

Candidate Name

**Judy Biggert**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: IL District: 13

Date of Disbursement

MM / DD / YYYY  
02 / 13 / 2012

**Transaction ID : B404700**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Judy Biggert for Congress**

Mailing Address P.O. Box 637

City Hinsdale State IL Zip Code 60522

Purpose of Disbursement  
Contribution

011

Candidate Name

**Judy Biggert**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: IL District: 13

Date of Disbursement

MM / DD / YYYY  
02 / 13 / 2012

**Transaction ID : B404701**

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 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

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: IL District: 17

Date of Disbursement

MM / DD / YYYY  
02 / 14 / 2012

**Transaction ID : B404821**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Jesse Jackson Jr for Congress**

Mailing Address P.O. Box 490286

City Chicago State IL Zip Code 60649

Purpose of Disbursement  
Contribution

011

Candidate Name

**Jesse Jackson Jr.**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: IL District: 02

Date of Disbursement

MM / DD / YYYY  
02 / 14 / 2012

**Transaction ID : B404822**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Elizabeth for MA Inc.**

Mailing Address P. O. Box 290568

City Boston State MA Zip Code 02129

Purpose of Disbursement  
Contribution

011

Candidate Name

**Elizabeth Warren**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: MA District:

Date of Disbursement

MM / DD / YYYY  
02 / 17 / 2012

**Transaction ID : B405054**

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. Elizabeth for MA Inc.**

Mailing Address P. O. Box 290568

City Boston State MA Zip Code 02129

Purpose of Disbursement  
Contribution

011

Candidate Name

**Elizabeth Warren**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: MA District:

Date of Disbursement

MM / DD / YYYY  
02 / 17 / 2012

**Transaction ID : B405055**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. The Bill Keating Committee**

Mailing Address PO Box 690353

City Quincy State MA Zip Code 02269

Purpose of Disbursement  
Contribution

011

Candidate Name

**William R Keating**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: MA District: 09

Date of Disbursement

MM / DD / YYYY  
02 / 22 / 2012

**Transaction ID : B405200**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Massachusetts Democratic State Cmte - Fed Account**

Mailing Address 77 Summer Street 10th Floor

City Boston State MA Zip Code 02110

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State: MA District:

Date of Disbursement

MM / DD / YYYY  
02 / 29 / 2012

**Transaction ID : B405595**

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. Ameripac: The Fund for A Greater America**

Mailing Address **700 13th Street NW #600**

City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20005</b>
Purpose of Disbursement Contribution	<input type="text" value="011"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: <b>MD</b> District:	Not Applicable	

Date of Disbursement  
 /  /

Transaction ID : **B404303**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)  
**B. Cummings for Congress Campaign Cmte**

Mailing Address **PO Box 1631**

City <b>Baltimore</b>	State <b>MD</b>	Zip Code <b>21203</b>
Purpose of Disbursement Contribution	<input type="text" value="011"/>	
Candidate Name <b>Elijah E Cummings</b>	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: <b>MD</b> District: <b>07</b>		

Date of Disbursement  
 /  /

Transaction ID : **B405063**

Amount of Each Disbursement this Period

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

Mailing Address **700 13th Street NW #600**

City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20005</b>
Purpose of Disbursement Contribution	<input type="text" value="011"/>	
Candidate Name <b>Steny H Hoyer</b>	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: <b>MD</b> District: <b>05</b>		

Date of Disbursement  
 /  /

Transaction ID : **B405062**

Amount of Each Disbursement this Period

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	<input type="text" value="10000.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 Street

City Kensington State MD Zip Code 20895

Purpose of Disbursement  
Contribution

011

Candidate Name

**Chris Van Hollen**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: MD District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		17		2012

**Transaction ID : B405064**

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**B. Donna Edwards for Congress**

Mailing Address P.O. Box 441153

City Fort Washington State MD Zip Code 20749

Purpose of Disbursement  
Contribution

011

Candidate Name

**Donna Edwards**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: MD District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		22		2012

**Transaction ID : B405176**

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**C. Dutch Ruppensberger for Congress**

Mailing Address 22 West Padonia Road Suite C-141

City Timonium State MD Zip Code 21093

Purpose of Disbursement  
Contribution

011

Candidate Name

**Dutch Ruppensberger**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: MD District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		22		2012

**Transaction ID : B405178**

Amount of Each Disbursement this Period

2000.00
---------

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

6000.00
---------

**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. John Sarbanes for Congress**

Mailing Address PO Box 6854

City Towson State MD Zip Code 21285

Purpose of Disbursement  
Contribution

011

Candidate Name

**John P. Sarbanes**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: MD District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	2		2	0	1	2

**Transaction ID : B405177**

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Berkley for Senate**

Mailing Address 3069 Conquista Court

City Las Vegas State NV Zip Code 89121

Purpose of Disbursement  
Contribution

011

Candidate Name

**Shelley Berkley**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: NV District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	9		2	0	1	2

**Transaction ID : B405593**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Berkley for Senate**

Mailing Address 3069 Conquista Court

City Las Vegas State NV Zip Code 89121

Purpose of Disbursement  
Contribution

011

Candidate Name

**Shelley Berkley**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: NV District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	9		2	0	1	2

**Transaction ID : B405594**

Amount of Each Disbursement this Period

3	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. Tim Bishop for Congress**

Mailing Address PO Box 437

City Farmingville State NY Zip Code 11738

Purpose of Disbursement Contribution

011

Candidate Name  
**Tim Bishop**

Category/Type

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

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 14 / 2012

Transaction ID : B404818

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

**B. Tim Bishop for Congress**

Mailing Address PO Box 437

City Farmingville State NY Zip Code 11738

Purpose of Disbursement Contribution

011

Candidate Name  
**Tim Bishop**

Category/Type

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

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 14 / 2012

Transaction ID : B404819

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Kathy Hochul For Congress**

Mailing Address P.O. Box 64

City Buffalo State NY Zip Code 14231

Purpose of Disbursement Contribution

011

Candidate Name  
**Kathy Hochul**

Category/Type

Office Sought:  House  Senate  President  
State: NY District: 26

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 14 / 2012

Transaction ID : B404815

Amount of Each Disbursement this Period

3000.00

Correct election designation

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

11000.00

**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: SB23

Transaction ID : B404815

This amendment is filed to correct an administrative error in election designation for the contribution to Kathy Hochul for Congress made on February 14, 2012.

Form/Schedule:

Transaction ID:

**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. Kathy Hochul For Congress**

Mailing Address P.O. Box 64

City Buffalo State NY Zip Code 14231

Purpose of Disbursement  
Contribution

011

Candidate Name

**Kathy Hochul**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NY District: 26

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 14 / 2012

Transaction ID : **B404815a**

Amount of Each Disbursement this Period

2000.00

Correct election designation

Full Name (Last, First, Middle Initial)

**B. Steve Israel for Congress Committee**

Mailing Address PO Box 777

City Deer Park State NY Zip Code 11729

Purpose of Disbursement  
Contribution

011

Candidate Name

**Steve Israel**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NY District: 02

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 14 / 2012

Transaction ID : **B404816**

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

**C. Steve Israel for Congress Committee**

Mailing Address PO Box 777

City Deer Park State NY Zip Code 11729

Purpose of Disbursement  
Contribution

011

Candidate Name

**Steve Israel**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NY District: 02

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 14 / 2012

Transaction ID : **B404817**

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. Bill Owens for Congress**

Mailing Address PO Box 1575

City State Zip Code  
Plattsburgh NY 12901

Purpose of Disbursement  
Contribution

011

Candidate Name

**Bill Owens**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NY District: 23

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2012

**Transaction ID : B404820**

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

**B. Marcia Fudge for Congress**

Mailing Address 3729 Silsby Rd

City State Zip Code  
University Heights OH 44118

Purpose of Disbursement  
Contribution

011

Candidate Name

**Marcia L Fudge**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: OH District: 11

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2012

**Transaction ID : B405199**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**C. Tim Ryan for Congress**

Mailing Address 1600 Roosevelt Avenue

City State Zip Code  
Niles OH 44446

Purpose of Disbursement  
Contribution

011

Candidate Name

**Tim Ryan**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: OH District: 17

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2012

**Transaction ID : B405198**

Amount of Each Disbursement this Period

2000.00

**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. Friends of Charlie Wilson**

Mailing Address P.O. Box 334

City Bridgeport State OH Zip Code 43912

Purpose of Disbursement  
Contribution

011

Candidate Name

**Charles A Wilson Jr.**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: OH District: 06

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 29 / 2012

**Transaction ID : B405592**

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

**B. Boockvar for Congress**

Mailing Address 73 Old Dublin Pike Suite 10 #134

City Doylestown State PA Zip Code 18901

Purpose of Disbursement  
Contribution

011

Candidate Name

**Kathryn Boockvar**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: PA District: 08

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 17 / 2012

**Transaction ID : B405059**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Bob Casey for Pennsylvania Committee**

Mailing Address 700 13th Street NW #600

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Contribution

011

Candidate Name

**Bob Casey Jr.**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: PA District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 17 / 2012

**Transaction ID : B405058**

Amount of Each Disbursement this Period

5000.00

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

14000.00

**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. Fattah for Congress**

Mailing Address 3900 Ford Road Suite 12-O

City Philadelphia State PA Zip Code 19131

Purpose of Disbursement  
Contribution

011

Candidate Name

**Chaka Fattah Sr.**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: PA District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		17		2012

**Transaction ID : B405056**

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**B. Allyson Schwartz for Congress**

Mailing Address P.O. Box 2232

City Jenkintown State PA Zip Code 19046

Purpose of Disbursement  
Contribution

011

Candidate Name

**Allyson Schwartz**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: PA District: 13

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		17		2012

**Transaction ID : B405057**

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**C. Friends of Glenn Thompson**

Mailing Address PO Box 1112

City State College State PA Zip Code 16804

Purpose of Disbursement  
Contribution

011

Candidate Name

**Glenn Thompson**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: PA District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		17		2012

**Transaction ID : B405060**

Amount of Each Disbursement this Period

2000.00
---------

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

6000.00
---------

**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. Cicilline Committee**

Mailing Address 118 N Main St Suite 2

City Providence State RI Zip Code 02903

Purpose of Disbursement Contribution

011

Candidate Name

Category/Type

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

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 22 / 2012

Transaction ID : B405196

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**B. Langevin for Congress**

Mailing Address 181a Knight Street

City Warwick State RI Zip Code 02886

Purpose of Disbursement Contribution

011

Candidate Name

**James Langevin**

Category/Type

Office Sought:  House  Senate  President  
State: RI District: 02

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 22 / 2012

Transaction ID : B405197

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**C. Whitehouse for Senate**

Mailing Address P.O. Box 40280

City Providence State RI Zip Code 02940

Purpose of Disbursement Contribution

011

Candidate Name

**Sheldon Whitehouse**

Category/Type

Office Sought:  House  Senate  President  
State: RI District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 22 / 2012

Transaction ID : B405195

Amount of Each Disbursement this Period

3000.00

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

7000.00

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

170900.00