

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 401

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

A. BARNES, KAREN, L, ,

Mailing Address 1209 HENSLEY DR

City
LEANDERState
TXZip Code
78641-8296FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AUSTIN ISDOccupation (for Individual)
BUS/TRUCK/VAN DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 11 / 20 / 2018

Transaction ID : A2018-2738984

Amount of Each Receipt this Period

11.25

☐ Memo Item

PAYROLL DEDUCTION

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

B. BARNES, ROBERT, J, ,

Mailing Address 204 RED JADE DR

City
UPPER MARLBOROState
MDZip Code
20774-1589FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MONTGOMERY COUNTY PUBLIC SCHOOLSOccupation (for Individual)
CLASSROOM TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2018

Transaction ID : A2018-2507759

Amount of Each Receipt this Period

0.20

☐ Memo Item

PAYROLL DEDUCTION

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

C. BARTELL, JOSEPH, A, ,

Mailing Address 5424 NOMAD LN

City
CHINO HILLSState
CAZip Code
91709-8711FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BREA-OLINDA UNIFIEDOccupation (for Individual)
EDUCATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2018

Transaction ID : A2018-2485316

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

36.45

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