

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 764 OF 1827

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

A. JENKINS, JENNIFER, L, ,

Mailing Address 1137 ROUTE 40

City
PILESGROVEState
NJZip Code
08098-3110FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WOODSTOWN-PILESGROVE REGOccupation (for Individual)
EDUCATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M	D D	Y Y Y Y
07	09	2019

Transaction ID : A2019-1854476

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. JENKINS, TRINA, , ,Mailing Address PO BOX 137
24 ESTELLE AVECity
DOROTHYState
NJZip Code
08317-0137FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PLEASANTVILLE CITYOccupation (for Individual)
EDUCATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M	D D	Y Y Y Y
07	09	2019

Transaction ID : A2019-1855087

Amount of Each Receipt this Period

210.00

☐ Memo Item

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

C. JENKINS, TRINA, , ,Mailing Address PO BOX 137
24 ESTELLE AVECity
DOROTHYState
NJZip Code
08317-0137FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PLEASANTVILLE CITYOccupation (for Individual)
EDUCATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M	D D	Y Y Y Y
07	09	2019

Transaction ID : A2019-1855086

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

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

265.00