

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

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

FOR LINE NUMBER: PAGE 1382 OF 1827

(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. ROBILLARD, LISA, , ,

Mailing Address 406 CLOVERWAY DR

City

ALEXANDRIA

State

VA

Zip Code

22314-4820

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NATIONAL EDUCATION ASSOCIATION

Occupation (for Individual)

CAMPAIGN SPECIALIST

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 17 / 2019

Transaction ID : A2019-1866905

Amount of Each Receipt this Period

40.00

☐ Memo Item

PAYROLL DEDUCTION

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

B. ROBINSON, BRENDA, K, ,

Mailing Address 6020 DENHAM DR

City

LITTLE ROCK

State

AR

Zip Code

72209-6335

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

PULASKI COUNTY SPECIAL SCH DIS

Occupation (for Individual)

CLASSROOM TEACHER

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 09 / 2019

Transaction ID : A2019-1846290

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

C. ROBINSON, BRENDA, K, ,

Mailing Address 6020 DENHAM DR

City

LITTLE ROCK

State

AR

Zip Code

72209-6335

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

PULASKI COUNTY SPECIAL SCH DIS

Occupation (for Individual)

CLASSROOM TEACHER

Receipt For:

☐ Primary☐ General☐ Other (specify)

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 09 / 2019

Transaction ID : A2019-1846291

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

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

90.00