

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

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

FOR LINE NUMBER: PAGE 1383 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. ROBINSON, BRENDA, K, ,**

Mailing Address 6020 DENHAM DR

City  
LITTLE ROCKState  
ARZip Code  
72209-6335FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PULASKI COUNTY SPECIAL SCH DISOccupation (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 Y  
07 / 09 / 2019

Transaction ID : A2019-1846292

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

**B. ROBINSON, BRENDA, K, ,**

Mailing Address 6020 DENHAM DR

City  
LITTLE ROCKState  
ARZip Code  
72209-6335FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PULASKI COUNTY SPECIAL SCH DISOccupation (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 Y  
07 / 09 / 2019

Transaction ID : A2019-1846293

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

**C. ROBINSON, DEIDRE, , ,**Mailing Address 421 STATEN AVE  
APT 204City  
OAKLANDState  
CAZip Code  
94610-4971FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
OAKLAND UNIFIEDOccupation (for Individual)  
CLASSROOM TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

213.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 16 / 2019

Transaction ID : A2019-1858793

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

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

240.00