

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

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

FOR LINE NUMBER: PAGE 1247 OF 1826

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Letter Carriers of U.S.A. Political Fund (Letter Carrier Political Fund)

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

A. PHILIPPY, CHRISTINA, M, ,

Mailing Address 1105 W Stratford Dr

City  
PeoriaState  
ILZip Code  
61614FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
USPSOccupation (for Individual)  
LETTER CARRIER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2019

Transaction ID : A2019-3227683

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

B. PHILIPPY, CHRISTINA, M, ,

Mailing Address 1105 W Stratford Dr

City  
PeoriaState  
ILZip Code  
61614FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
USPSOccupation (for Individual)  
LETTER CARRIER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2019

Transaction ID : A2019-3227684

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. PHILLABAUM, JESSE, S, ,

Mailing Address 3369 SCHNORF JONES RD

City  
ARCANUMState  
OHZip Code  
45304FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
USPSOccupation (for Individual)  
LETTER CARRIER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2019

Transaction ID : A2019-3221675

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

50.00

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