

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

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

FOR LINE NUMBER: PAGE 1373 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. ROLANDO, FREDRIC, V, ,

Mailing Address 118 ORANGE BLOSSOM CT

City
FREDERICKSBURGState
VAZip Code
22405FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 20 / 2019

Transaction ID : A2019-3245235

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. ROLANDO, FREDRIC, V, ,

Mailing Address 118 ORANGE BLOSSOM CT

City
FREDERICKSBURGState
VAZip Code
22405FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 20 / 2019

Transaction ID : A2019-3245236

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. ROLFE, WILLIAM, L, ,

Mailing Address 14826 WHEELER RD

City
LAGRANGEState
OHZip Code
44050FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
USPSOccupation (for Individual)
RETIRED 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 Y
12 / 04 / 2019

Transaction ID : A2019-3230172

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

95.00

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