

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

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

FOR LINE NUMBER: PAGE 581 OF 2246

(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. FAKE-MOORMAN, DANIELLE, R, ,

Mailing Address 2421 Maple Hill Dr

City

Fort Collins

State

CO

Zip Code

80524

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

USPS

Occupation (for Individual)

LETTER CARRIER

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 11 / 29 / 2019

Transaction ID : A2019-2934870

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. FALLIS, MARK, D, ,

Mailing Address 2741 THOMPSON AVE

City

DES MOINES

State

IA

Zip Code

50317

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

USPS

Occupation (for Individual)

RETIRED CARRIER

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 11 / 04 / 2019

Transaction ID : A2019-2928315

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. FARLEY, SAMUEL, H, ,

Mailing Address 368 BROADWAY ST

City

AMHERST

State

OH

Zip Code

44001

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

USPS

Occupation (for Individual)

LETTER CARRIER

Receipt For:

☐ Primary☐ General☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2019

Transaction ID : A2019-2907194

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

75.00

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