

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1058 OF 2246

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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. KLEIN, SELMA, M, ,

Mailing Address 510 W MAPLE ST

City
RAWLINSState
WYZip Code
82301FEC 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 ▼

230.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
11	/	15	/	2019

Transaction ID : A2019-2917507

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. KLEIN, SELMA, M, ,

Mailing Address 510 W MAPLE ST

City
RAWLINSState
WYZip Code
82301FEC 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 Y
11	/	29	/	2019

Transaction ID : A2019-2917508

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. KLEMP, TRAVIS, D, ,

Mailing Address 608 FOREST AVE

City
FORT DODGEState
IAZip Code
50501FEC 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 ▼

310.00

Date of Receipt

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

Transaction ID : A2019-2896110

Amount of Each Receipt this Period

15.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

35.00

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