

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<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
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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. MARTINEZ, JOSEPH, M, ,**

Mailing Address PO BOX 5151

City

SN LIS OBISP

State

CA

Zip Code

93403

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

USPS

Occupation (for Individual)

LETTER CARRIER

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

230.00

Date of Receipt

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

**Transaction ID : A2019-2930422**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

**B. MARTINEZ, JOSEPH, M, ,**

Mailing Address PO BOX 5151

City

SN LIS OBISP

State

CA

Zip Code

93403

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

USPS

Occupation (for Individual)

LETTER CARRIER

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

**Transaction ID : A2019-2930423**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

**C. MARTINEZ, MARY, H, ,**

Mailing Address 68810 LOS GATOS RD

City

CATHEDRAL CITY

State

CA

Zip Code

92234

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

USPS

Occupation (for Individual)

RETIRED CARRIER

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

220.00

Date of Receipt

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

**Transaction ID : A2019-2909189**

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)..... ►

40.00