

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

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

A. Beard, Dexter, B., ,

Mailing Address 2955 Mallory Cir Apt 5301

City
Kissimmee

State
FL

Zip Code
34747-1841

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Wheel City

Occupation (for Individual)

VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 02 / 2019

Transaction ID : SA11AI.132858

Amount of Each Receipt this Period

30.00

☐ Memo Item
Contribution

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

B. Beauchea, Robert, , ,

Mailing Address 3 Bev Ave

City

Piscataway

State

NJ

Zip Code

08854-5341

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 01 / 2019

Transaction ID : SA11AI.132859

Amount of Each Receipt this Period

50.00

☐ Memo Item
Contribution

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

C. Becker, Deborah, , ,

Mailing Address 1628 Laurel Ave

City

Eau Claire

State

WI

Zip Code

54701-4434

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Deborah Becker Ins and Fin Svcs Inc.

Occupation (for Individual)

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 02 / 2019

Transaction ID : SA11AI.132865

Amount of Each Receipt this Period

25.00

☐ Memo Item
Contribution

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

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

105.00