

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

FOR LINE NUMBER: PAGE 213 OF 1028

(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
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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. DENEVAN, LAURA, A, ,

Mailing Address 113 16TH AVE

City
LEWISTONState
IDZip Code
83501FEC 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 ▼

265.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	04	2019

Transaction ID : A2019-2679570

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

B. DENEVAN, LAURA, A, ,

Mailing Address 113 16TH AVE

City
LEWISTONState
IDZip Code
83501FEC 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 ▼

285.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	18	2019

Transaction ID : A2019-2679571

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. DENNIS, KERRY, D, ,

Mailing Address 726 W 10TH ST

City
CASPERState
WYZip Code
82601FEC 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 ▼

210.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	18	2019

Transaction ID : A2019-2673662

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

50.00