

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 508 OF 1028

(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. LAWSON, DAVID, A, ,

Mailing Address PO BOX 340903

City

SACRAMENTO

State

CA

Zip Code

95834

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 ▼

320.00

Date of Receipt

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

Transaction ID : A2019-2665806

Amount of Each Receipt this Period

20.00

☐

Memo Item

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

B. LAWSON, JOHN, E, ,

Mailing Address 13842 Outlet Dr

City

Silver Sprin

State

MD

Zip Code

20904

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 ▼

670.00

Date of Receipt

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

Transaction ID : A2019-2681224

Amount of Each Receipt this Period

35.00

☐

Memo Item

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

C. LAWSON, JOHN, E, ,

Mailing Address 13842 Outlet Dr

City

Silver Sprin

State

MD

Zip Code

20904

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 ▼

705.00

Date of Receipt

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

Transaction ID : A2019-2681225

Amount of Each Receipt this Period

35.00

☐

Memo Item

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

90.00

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