

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)

National Association of Realtors Political Action Committee

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

A. Leigh, Robert, E, ,

Mailing Address 35 Foxwood Cir E.

City
Hernando

State
MS

Zip Code
38632-8113

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Century 21 Bob Leigh and Assoc

Occupation (for Individual)
Real Estate Broker

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
05 / 13 / 2019

Transaction ID : A3D8A26F6A3024A26888

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

B. Richardson, Barbara, , ,

Mailing Address 5404 Terry Road

City
Jackson

State
MS

Zip Code
39272-5918

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Eternity Real Estate

Occupation (for Individual)
Real Estate Broker

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
06 / 06 / 2019

Transaction ID : A27933218E21549E7859

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

C. Alfonso, Carlene, , ,

Mailing Address 5352 Red Creek Road

City
Long Beach

State
MS

Zip Code
39560-9711

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Coldwell Banker Alfonso Realty

Occupation (for Individual)
Real Estate Broker

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
06 / 03 / 2019

Transaction ID : A6F8721983B6E4167999

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

900.00

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