

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

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

FOR LINE NUMBER: PAGE 254 OF 480

(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, JOHN, E, ,

Mailing Address 13842 Outlet Dr

City  
Silver SprinState  
MDZip Code  
20904FEC 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 ▼

460.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 07 / 12 / 2019

Transaction ID : A2019-1809245

Amount of Each Receipt this Period

35.00

☐ 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 SprinState  
MDZip Code  
20904FEC 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 ▼

495.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 07 / 26 / 2019

Transaction ID : A2019-1809246

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

C. LAWSON, RYAN, L, ,

Mailing Address 7529 TAUROMEE AVE

City  
KANSAS CITYState  
KSZip Code  
66112FEC 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  
 07 / 12 / 2019

Transaction ID : A2019-1814602

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

85.00

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