

# **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)

**NEA Fund for Children and Public Education**

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

**A. CATALANO, BARBARA, , ,**

Mailing Address 1773 SOM CENTER RD

City  
GATES MILLS

State  
OH

Zip Code  
44040-9361

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MAYFIELD CITY SD

Occupation (for Individual)  
EDUCATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.00

Date of Receipt

12 / 13 / 2019

**Transaction ID : A2019-3128052**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

**B. CHAHDA-GONZALEZ, RITA, M, ,**

Mailing Address 3475 ROCKY RIVER DR

City  
CLEVELAND

State  
OH

Zip Code  
44111-2940

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LAKEWOOD PUBLIC SCHOOLS

Occupation (for Individual)  
CLASSROOM TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.37

Date of Receipt

12 / 03 / 2019

**Transaction ID : A2019-3129079**

Amount of Each Receipt this Period

0.40

☐ Memo Item

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

**C. CHAHDA-GONZALEZ, RITA, M, ,**

Mailing Address 3475 ROCKY RIVER DR

City  
CLEVELAND

State  
OH

Zip Code  
44111-2940

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LAKEWOOD PUBLIC SCHOOLS

Occupation (for Individual)  
CLASSROOM TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

254.97

Date of Receipt

12 / 06 / 2019

**Transaction ID : A2019-3151734**

Amount of Each Receipt this Period

1.60

☐ Memo Item

PAYROLL DEDUCTION

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

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

12.00