

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

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

FOR LINE NUMBER: PAGE 250 OF 295

(check only one)

☒ 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. Terrell, Willie, A, ,

Mailing Address 1721 Radio Rd

B6

City

Dayton

State

OH

Zip Code

45403

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

DAYTON CITY SD

Occupation (for Individual)

Teacher

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

211.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2019

Transaction ID : A2019-3128032

Amount of Each Receipt this Period

10.00

☐

Memo Item

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

B. TESTERMAN, JAMES, P, ,

Mailing Address 19912 AMES DR

City

REHOBOTH BEACH

State

DE

Zip Code

19971-7134

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

CENTRAL YORK SD

Occupation (for Individual)

CLASSROOM TEACHER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1650.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 06 / 2019

Transaction ID : A2019-3158457

Amount of Each Receipt this Period

50.00

☐

Memo Item

PAYROLL DEDUCTION

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

C. THESMAN, ROBERT, M, ,

Mailing Address 11211 W 64TH TER

APT 309

City

LAWRENCE

State

KS

Zip Code

66203-3375

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

BLUE VALLEY

Occupation (for Individual)

COUNSELOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

292.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 04 / 2019

Transaction ID : A2019-3128027

Amount of Each Receipt this Period

10.00

☐

Memo Item

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

70.00

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