

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 255 OF 295
(check only one)

| | | | | | | | | |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 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. TRAVER, SUE, M, ,

Mailing Address 3709 TEAL LN

City
BEDFORDState
TXZip Code
76021-2740FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HURST-EULESS-BEDFORD ISDOccupation (for Individual)
CLASSROOM TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.50

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 23 | | 2019 |

Transaction ID : A2019-3178279

Amount of Each Receipt this Period

40.50

☐ Memo Item

PAYROLL DEDUCTION

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

B. TULLY, THOMAS, E, ,

Mailing Address 556 LAKEVIEW DR

City
OSWEGOState
ILZip Code
60543-8747FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GLENBARD DISTRICT 87Occupation (for Individual)
UNKNOWN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 18 | | 2019 |

Transaction ID : A2019-3131034

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. VALENCIA, ARLINDA, , ,

Mailing Address 372 INVERNESS DR

City
HORIZON CITYState
TXZip Code
79928-6492FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
YSLETA ISDOccupation (for Individual)
CLASSROOM TEACHER

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 |
| 12 | | 23 | | 2019 |

Transaction ID : A2019-3166605

Amount of Each Receipt this Period

20.00

☐ Memo Item

PAYROLL DEDUCTION

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

40.50

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