

**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)	PAGE 1653 / 3187
	<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)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DR. RICHARD OLAUGHLIN	Date of Receipt
	Mailing Address 45 CYPRESS LN	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 18 / 2010
	City State Zip Code WEST CREEK NJ 08092-2839	Transaction ID: SA11.13928861
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 300.00
Name of Employer AMI	Occupation PHYSICIAN	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 2950.00	

B.	Full Name (Last, First, Middle Initial) DR. RICHARD OLAUGHLIN	Date of Receipt
	Mailing Address 45 CYPRESS LN	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 19 / 2010
	City State Zip Code WEST CREEK NJ 08092-2839	Transaction ID: SA11.13931481
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 750.00
Name of Employer AMI	Occupation PHYSICIAN	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 2950.00	

C.	Full Name (Last, First, Middle Initial) MICHAEL C. OLCOTT	Date of Receipt
	Mailing Address P.O. BOX 330427	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 04 / 2010
	City State Zip Code ARGYLE TX 76226	Transaction ID: SA11.13965561
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 500.00
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 500.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1550.00
TOTAL This Period (last page this line number only)	<input type="text"/>