

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

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

FOR LINE NUMBER: PAGE 418 OF 3275

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

A. CAMERON, GEORGE, , ,

Mailing Address 5400 S WILLIAMSON BLVD
2-310

City
PORT ORANGE

State
FL

Zip Code
32128-3702

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MICHAELS

Occupation (for Individual)
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 25 / 2019

Transaction ID : SA11A.18106552

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. CAMERON, RALPH, , ,

Mailing Address 1900 SW.CAMPUS DR.
45-104

City
FEDERAL WAY

State
WA

Zip Code
98023-6533

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 01 / 2019

Transaction ID : SA11A.18065992

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

C. CAMERON, STEFFEN, S., DR.,

Mailing Address 1133 GLEN DR. NE

City
NEW PHILADELPHIA

State
OH

Zip Code
44663-2797

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CLEVELAND CLINIC. / AKRON GENERAL PPG

Occupation (for Individual)
FAMILY DOCTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

203.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 29 / 2019

Transaction ID : SA11A.18113416

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

125.00

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