

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

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

FOR LINE NUMBER: PAGE 1284 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. HUGHES, KEVIN, S., MR.,**

Mailing Address 13 GLOUCESTER STREET  
SUITE 4

City  
BOSTON

State  
MA

Zip Code  
02115-1705

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

MASS GENERAL HOSPITAL

Occupation (for Individual)

CO-DIRECTOR, AVON COMPREHENSIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 26 / 2019

Transaction ID : SA11A.18107297

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**B. HUGHES, LOUIS, R., MR.,**

Mailing Address 86 INDIAN HILL ROAD

City

WINNETKA

State

IL

Zip Code

60093-3934

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

SELF

Occupation (for Individual)

VENTURE CAPITAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : SA11A.18112695

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**C. HUGHES, SUZANNE C., , ,**

Mailing Address 2340 SHINGLE SPRINGS DRIVE

City

PLACERVILLE

State

CA

Zip Code

95667-9469

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.18066376

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

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

200.00