

**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 345 OF 1401
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**NRCC**

**A. FOGEL, DAVID, L., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 649 MERWINS LANE  
 City FAIRFIELD State CT Zip Code 06824-1973  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INDEX IQ Occupation (for Individual) BUSINESS EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 18 / 2019  
**Transaction ID : SA11A.17844069**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

**B. FORD, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 809 NORTH RAILROAD AVE  
 City WEST PALM BEACH State FL Zip Code 33401-3301  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PB CAST STONE,INC Occupation (for Individual) SELF EMPLOYED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 29 / 2019  
**Transaction ID : SA11A.17863311**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

**C. FORD, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 809 NORTH RAILROAD AVE  
 City WEST PALM BEACH State FL Zip Code 33401-3301  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PB CAST STONE,INC Occupation (for Individual) SELF EMPLOYED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 29 / 2019  
**Transaction ID : SA11A.17863315**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	