

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2599 OF 19481

(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)

**NRSC**

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

**A. SZABO, MARIANNA, , ,**

Mailing Address 9700 N WILLOW AVE

City  
TAMPAState  
FLZip Code  
33612-7762FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MID-FLORIDA PATHOLOGYOccupation (for Individual)  
PATHOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		05		2020

Transaction ID : SA11A.14931918

Amount of Each Receipt this Period

2.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

**B. WINRED**

Mailing Address P.O. BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12993736.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		05		2020

Transaction ID : SA11C.1492853025369

Amount of Each Receipt this Period

25.00

☒ Memo Item  
CONTRIBUTION
SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

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

**C. CHRISTIE, JOHN, S, ,**

Mailing Address 147 MAPLE AVE

City  
FRANKFORTState  
MIZip Code  
49635-9745FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1404.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		05		2020

Transaction ID : SA11A.14931927

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

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

27.00