

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

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

FOR LINE NUMBER: PAGE 129 OF 724  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. MS. JOANN JARVIS**

Mailing Address 109 WEDGEWOOD LN

City  
KERRVILLE

State Zip Code  
TX 78028-9524

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.00

Date of Receipt

05 / 11 / 2015

Transaction ID : SA11.15916276

Amount of Each Receipt this Period

20.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MR. EDWARD B. JOBE**

Mailing Address 47435 E ELDORADO DRIVE

City  
INDIAN WELLS

State Zip Code  
CA 92210-8673

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMERICAN REINSURANCE CO

Occupation

REINSURANCE AND CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

05 / 11 / 2015

Transaction ID : SA11.15916356

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MR. DONALD L. JUILLARD**

Mailing Address 06747 COUNTY ROAD 19

City  
STRYKER

State Zip Code  
OH 43557-9760

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFF

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 11 / 2015

Transaction ID : SA11.15915891

Amount of Each Receipt this Period

50.00

CONTRIBUTION

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

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

570.00