

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

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

FOR LINE NUMBER: PAGE 515 / 1023

(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)  
**NATIONAL REPUBLICAN SENATORIAL COMMITTEE**

A.

Full Name (Last, First, Middle Initial)

MR. HUGHL. MILLER

Mailing Address P.O. BOX 30099

City State Zip Code  
**WINONA MN 55987-1099**

FEC ID number of contributing federal political committee. **C**

Name of Employer  
INFORMATION REQUESTED PER  
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 008\*  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt

MM / DD / YYYY  
08 / 05 / 2009

Transaction ID: SA11.8347523

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JAMES MILLER

Mailing Address 16 DELAWARE AVE

City State Zip Code  
**DANVILLE IL 61832-6110**

FEC ID number of contributing federal political committee. **C**

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For: 008\*  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
216.00

Date of Receipt

MM / DD / YYYY  
08 / 05 / 2009

Transaction ID: SA11.8347597

Amount of Each Receipt this Period

60.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JAMES MILLER

Mailing Address 16 DELAWARE AVE

City State Zip Code  
**DANVILLE IL 61832-6110**

FEC ID number of contributing federal political committee. **C**

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For: 008\*  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
216.00

Date of Receipt

MM / DD / YYYY  
08 / 05 / 2009

Transaction ID: SA11.8348027

Amount of Each Receipt this Period

35.00

CONTRIBUTION

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

595.00

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

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