

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 879 OF 1347
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NRCC

A. WHARTON, MARK, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 368 PEPPERTREE ROAD

City VENICE	State FL	Zip Code 34293-1138
----------------	-------------	------------------------

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

Name of Employer (for Individual) PSCU	Occupation (for Individual) FRAUD DETECTION
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
358.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2017

Transaction ID : SA11A.16760795

Amount of Each Receipt this Period
27.00

Memo Item
CONTRIBUTION

B. WHEELER, PAULA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1337 S JEFFERSON ST

City CASPER	State WY	Zip Code 82601-4428
----------------	-------------	------------------------

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 ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		21		2017

Transaction ID : SA11A.16759698

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. WHEELER, THOMAS, B., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1221 GULF SHORE DRIVE
502

City NAPLES	State FL	Zip Code 34102-4922
----------------	-------------	------------------------

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 ▼
2450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		19		2017

Transaction ID : SA11A.16758629

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	177.00
TOTAL This Period (last page this line number only).....▶	