

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

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

FOR LINE NUMBER: PAGE 175 OF 1361

(check only one)

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

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NAME OF COMMITTEE (In Full)

NRSC

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

A. DAVIS, WILLIAM, H., MR.,

Mailing Address 21 WINDING WAY

City  
VERONA

State  
PA

Zip Code  
15147-3888

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

MM / DD / YYYY  
04 / 17 / 2017

Transaction ID : SA11A.12488655

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

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

B. DE CICCIO, JEAN, E., MRS.,

Mailing Address 4302 TOLEDO BEND DR.

City  
RICHMOND

State  
TX

Zip Code  
77406-7948

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 ▼

204.00

Date of Receipt

MM / DD / YYYY  
04 / 29 / 2017

Transaction ID : SA11A.12505628

Amount of Each Receipt this Period

51.00

☐ Memo Item  
CONTRIBUTION

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

C. DE LACHICA, EDUARDO, , MR.,

Mailing Address 21 SCOTSMOOR

City  
SUGAR LAND

State  
TX

Zip Code  
77479-2519

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FREEDOM FEDERAL BONDING AGENCY

Occupation (for Individual)  
INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

261.00

Date of Receipt

MM / DD / YYYY  
04 / 21 / 2017

Transaction ID : SA11A.12496252

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

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

501.00

201705190200148423