

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 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. LOWEY, EVE, , ,**

Mailing Address 3188 AIRWAY AVE  
SUITE B

City  
NEWPORT BEACH

State  
CA

Zip Code  
92660-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHAMELEON DESIGN

Occupation (for Individual)  
INTERIOR DESIGN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 05 / 2019

Transaction ID : SA11A.13682464

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**B. LOWEY, EVE, , ,**

Mailing Address 3188 AIRWAY AVE  
SUITE B

City  
NEWPORT BEACH

State  
CA

Zip Code  
92660-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHAMELEON DESIGN

Occupation (for Individual)  
INTERIOR DESIGN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 05 / 2019

Transaction ID : SA11A.13682465

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**C. LOWRANCE, RICHARD, H., MR.,**

Mailing Address 831 CLIFTON ROAD, N. E.

City  
ATLANTA

State  
GA

Zip Code  
30307-1223

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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 04 / 2019

Transaction ID : SA11A.13682064

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)..... ►

450.00